For Office Use Only	
Possible Work Locations	Possible Positions

APPLICATION

(Short Form)

(PLEASE PRINT PLAINLY)

For Office Use Only	
Work Location:	Rate:
Position:	Date:

Position(s) applied for _____

Were you previously employed by us? _____ If yes, when? _____

If your application is considered favorable, on what date will you be available for work? _____20____

PERSONAL

Date _____

Name _____ Social Security No. _____
Last First Middle

Present Address _____ Telephone No. _____
No. Street City State Zip

Are you legally eligible for employment in the U.S.A.? Yes ___ No ___ (If yes, verification will be required.)

Are you of the legal age to work? _____

List below present and past employment, beginning with your most recent

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone #								

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone #								

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone #								

I hereby give permission to contact the employers listed above concerning my prior work experience.

Signed: _____

If there is a particular employer(s) you do not wish us to contact, please indicate which one(s). _____

_____

Circle last year completed					**Describe any other training or education**
Elementary School	5	6	7	8	_____
High School	1	2	3	4	_____
College	1	2	3	4	_____

PLEASE READ AND SIGN BELOW

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may be used in my dismissal. I further understand that this application is not, and is not intended to be, a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by employer party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in writing signed by an employer. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

In making this application for employment, I authorize you to make an investigative consumer report whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request, in a reasonable period of time, to receive additional, detailed information about the nature and scope of any such investigative report that is made.

_____

Signature of Applicant

Return to ESCO Douglas Plant