

# APPLICATION FOR EMPLOYMENT

**NOTICE TO APPLICANTS**  
Screening tests for illegal drug use are required as a condition of employment.



All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or veteran status, medical condition or handicap, or any other status protected by law. We are an Equal Opportunity Employer.

## PERSONAL INFORMATION

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number Street City State Zip

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Are you over 18 years of age? \_\_\_\_\_ Yes \_\_\_\_\_ No

\*If no, a work permit will be required.

Are you legally eligible for permanent employment in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

\*If no, a work permit will be required.

Position(s) applied for: \_\_\_\_\_

Full or Part Time: \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ Date available to start work: \_\_\_\_\_

Salary or Wages desired: \$ \_\_\_\_\_ Number hours per week desired: \_\_\_\_\_

If hired, are you available and willing to work overtime if required? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you worked for us before? \_\_\_\_\_ If Yes, when? \_\_\_\_\_ Position: \_\_\_\_\_

Indicate special qualifications or skills:

List Pressure Vessel and Heat Exchanger Experience:

<b>EDUCATION</b> (Name/Location of School)	Course of Study	Years Completed	Did you Graduate?
High School:			
College:			
Other:			
Other:			

Have you ever been convicted of a felony? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, list convictions. (Note: A conviction does not necessarily disqualify an applicant for the position being applied for)

**EMPLOYMENT HISTORY** (Start with most recent employer)

Employer:	Phone:	From:	To:
Address:	City, State & Zip	Position:	
Duties:		Supervisor's Name:	
		Starting Salary:	
Reason for Leaving:		Final Salary:	

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Address:	City, State & Zip	Position:	
Duties:		Supervisor's Name:	
		Starting Salary:	
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Employer:	Phone:	From:	To:
Address:	City, State & Zip	Position:	
Duties:		Supervisor's Name:	
		Starting Salary:	
Reason for Leaving:		Final Salary:	

**PERSONAL REFERENCES**

Name	Address	Years Known	Telephone

The above information is true and complete to the best of my knowledge. Should I be employed by the Company, any misrepresentation or false statement contained herein may be considered cause for possible dismissal. The Company has my permission to obtain all necessary information from the references I have listed, or any other sources, concerning my prior employment, personal history or credit standing. I release all parties from any possible damages resulting from disclosing such information with or without prior written notice to me. I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in any reports furnished to the Company.

I understand this application does not constitute an employment contract of any kind. Should I be employed by the Company, I may resign such employment at any time at my discretion with or without prior notice and the Company may terminate my employment at any time at their discretion, with or without cause and with or without prior notice.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**FOR COMPANY USE ONLY. DO NOT WRITE BELOW THIS LINE**

Summary of Interview:	
_____	
_____	
_____	
Accepted for Employment: <input type="checkbox"/> Yes <input type="checkbox"/> No	Position: _____
Starting Rate \$ _____ Per _____	Scheduled to Start Work: _____
Interviewed by: _____	Date: _____
Approved by: _____	Date: _____