



Application for Employment

(Please Print)

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religious persuasion, marital status, political belief, or disability that does not prohibit performance of essential job functions.

Date: _____

I. Personal Information

Name: Last First Middle

Present Address

Permanent Address (if different than above)

Telephone

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, Green Card, etc.) within three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Position Applied For: _____

1. Is there any information we would need about your name or use of another name for us to be able to check your work record? Please specify:

2. Do you have any relatives who are presently (or have formerly been) employed by Power Test?

3. How were you referred to Power Test? _____

4. Have you ever been convicted of a felony? ___ Yes ___ No If yes, please explain:

5. Do you have a valid driver's license? ___ Yes ___ No

Driver's license number _____

6. Do you have a military record? ___ Yes ___ No

Branch/Rank _____ Dates : _____ From To

II. Educational History

School Name/Location	Years Completed	Degree/Diploma
Elem/Jr. High _____		
High School _____		
College _____		
Tech. Training _____		
Other _____		

Do you speak/write a language other than English? ___ Yes ___ No

Language(s) _____

Do you type? ___ Yes ___ No Words per minute _____

III. Employment Record *Please include all employment for the last five years.*

- | | |
|--|----------------------------------|
| _____ | _____ |
| Company Name (Current or Most Recent Employer) | Position Held |
| _____ | Dates Employed: _____ |
| Address | From To |
| _____ | _____ |
| Manager / Supervisor | Telephone Wage/Salary |
| _____ | |
| Reason For Leaving | |
- | | |
|----------------------|----------------------------------|
| _____ | _____ |
| Company Name | Position Held |
| _____ | Dates Employed: _____ |
| Address | From To |
| _____ | _____ |
| Manager / Supervisor | Telephone Wage/Salary |
| _____ | |
| Reason For Leaving | |
- | | |
|----------------------|----------------------------------|
| _____ | _____ |
| Company Name | Position Held |
| _____ | Dates Employed: _____ |
| Address | From To |
| _____ | _____ |
| Manager / Supervisor | Telephone Wage/Salary |
| _____ | |
| Reason For Leaving | |

NOTE: Use a separate sheet to list additional employers, if necessary. We will contact all of the employers listed on this application unless you specifically exclude them below. Please list any employers you do not want us to contact and your reason for the exclusion:

(Employer's Name) Reason

(Employer's Name) Reason

Have you served a formal apprenticeship? ___ Yes ___ No

If yes, which trade? _____

Are you an experienced operator of any plant machines or equipment? ___ Yes ___ No

Please list _____

Have you been a volunteer worker? ___ Yes ___ No

If yes, describe _____

IV. References *Please do not include relatives or former employers.*

1. _____
Name Years Known

Address Telephone

Occupation

2. _____
Name Years Known

Address Telephone

Occupation

3. _____
Name Years Known

Address Telephone

Occupation

V. Work Availability

1. If your application receives favorable consideration, when will you be available to begin work?

2. Do you have any objection to working overtime? () Yes () No
3. Can you work overtime without prior notice? () Yes () No
4. Can you work on Saturday? () Yes () No
5. Can you work on Sunday? () Yes () No
6. Can you travel if required by this position? () Yes () No

VI. Salary / Hourly Rate Requirements

If your application receives favorable consideration, what salary/hourly rate would you require?

\$ _____ per _____

VII. Certification

I certify that the answers given to the foregoing questions and statements are true and correct without consequential omissions of any kind. I agree that Power Test Inc. shall not be liable in any respect if my employment is terminated because of falsity of statements, answers or omissions made by me in this questionnaire.

I am willing to submit to a urine test prior to my employment to determine potential drug use. A positive test, or failure to submit to the test, will void any employment arrangements made prior to the drug screen.

I authorize the companies, schools and persons named above to give information regarding my employment, character and qualifications whether or not it is in their formal records.

I hereby release said companies, schools and persons from all liability for any damage for issuing this information. I understand that any misleading or incorrect statements may render this application void, and if employed, would be cause for termination.

Signature

Date