FOR OFFICE USE OF	NLY SHIFT	TRAINING	START_	
WE ARE AN EQUAL OF RACE, COLOR, RESTATUS, HANDICAP	OPPORTUNITY EMP ELIGION, SEX, NATI OR DISABILITY.	ON FOR EMPLOYN LOYER AND DO NOT I ONAL ORIGIN, AGE, M	DISCRIMINATE O	N THE BASIS VETERANS
PERSONAL INFO	<u>PRMATION</u>			
Name				
NameFirst	I	nitial	Last	
Present Address		C:t	Stata	Zip Code
Str	reet	City	State	Zip Code
Telephone () _	S	ocial Security No		
(5-2)	izen, Do you have	you have a work per the legal right to re		
Have you ever beer	n discharged or as	ked to resign by an	employer? YES_	NO
If yes, please explai	in:		terre en	wysta wski ws
How did you hear a	about Doyle Sham	rock:		
If a referral who re	eferred you:			
A RECORD OF CRIMI EMPLOYMENT, SINC THE OFFENSE, THE N	NAL CONVICTION E THE COMPANY W JATURE AND SERIO	WILL NOT NECESSARI JILL CONSIDER FACTO JUSNESS OF THE VIOL LOYMENT DECISION.	LY BE A BAR TO DRS SUCH AS AGE ATION, AND EVII	E, TIME OF

Have you ever been convicted of a crime, other than minor traffic violations?

If yes, please explain:_____

YES____NO____

REQUIRE YOU TO DRIVE COMPANY VEHICLES. Do you have a valid driver's license? YES NO License Number and State: Have you had any accidents in the last five years? YES NO_____ If yes, please give details: Have you been cited for any moving violations in the last five years? YES___NO___ If yes, please give details: Has your driver's license ever been suspended, revoked, denied, or cancelled? YES NO If yes, please give details: EMPLOYMENT DESIRED Position(s) Applied For:_____ Date available to start: CIRCLE ALL THAT APPLY: Availability: 1ST SHIFT 2ND SHIFT 3RD SHIFT 7:00am-3:00pm 3:00pm-11:00pm 11:00pm 11:00pm ALL SHIFTS Have you ever worked for this facility before? YES NO_____NO____ When: Your Supervisor: Reason for leaving: **EDUCATION** Highest Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12

Grade School High School Name of School last attended: Vocational or Trade Training:

PLEASE COMPLETE THIS SECTION IF THE POSITION YOU ARE APPLYING FOR MIGHT

EMPLOYMENT HISTORY

LIST BELOW YOUR WORK EXPERIENCE (START WITH YOUR PRESENT OR MOST RECENT EMPLOYMER) FOR THE LAST FIVE YEARS OR YOUR LAST THREE EMPLOYERS, WHICHEVER WILL PROVIDE US WITH THE GREATEST INFORMATION ABOUT YOU. PLEASE ACCOUNT FOR ALL PERIODS OF UNEMPLOYMENT IN THIS SECTION.

COMPANY NAME:	PHONE:
ADDRESS:	FROMTO
SUPERVISOR:	RATE OF PAY STARTFINISH
TITLE AND DUTIES:	REASON FOR LEAVING
COMPANY NAME:	PHONE:
ADDRESS:	EMPLOYED TO
SUPERVISOR:	RATE OF PAY STARTFINISH
TITLE AND DUTIES:	REASON FOR LEAVING
COMPANY NAME:	PHONE:
ADDRESS:	EMPLOYED TO
SUPERVISOR:	RATE OF PAY STARTFINISH
TITLE AND DUTIES:	REASON FOR LEAVING
EXPLANATION FOR UNEMPLOYMENT:	
MAY WE CONTACT YOUR PRESENT EMPLO	OYER AT THIS TIME? YESNO

L	E	T	F'I	D	FIN	JC	ES:
F	C I	r	1	•	17/11	ч.	

LIST THE NAMES OF ANY PROFESSIONAL OR PERSONAL CHARACTER REFERENCES WHO HAVE KNOWN YOU FOR **AT LEAST THREE YEARS** AND FROM WHOM YOU CAN OBTAIN LETTERS OF RECOMMENDATION. PLEASE DO NO LIST RELATIVES.

NAME:	ADDRESS:	
OCCUPATION:	PHONE:	
REALTIONSHIP TO APPLIC	CANT:	
NAME:	ADDRESS:	
OCCUPATION:	PHONE:	
REALTIONSHIP TO APPLIC	CANT:	
NAME:	ADDRESS:	***
OCCUPATION:	PHONE:	
REALTIONSHIP TO APPLIC	CANT:	

PLEASE READ CAREFULLY AND SIGN:

BY SIGNING BELOW, I CERTIFY THAT I HAVE READ, UNDERSTAND, AND AGREE TO EACH OF THE FOLLOWING STATEMENTS:

All of the information I have supplied on this application is true, accurate and complete, to the best of my knowledge, and I have not knowingly withheld any information which, if known to the company, would affect my application unfavorably.

If the Company hires me, and they discover at any time during my employment that any of the statements or answers on this application are false, misleading or incomplete, I may be dismissed immediately from my job.

In consideration of my employment with the Company, I agree to abide by all the Company's rules and regulations.

I understand that nothing in this employment application creates a contract of employment between me and the company. If I am hired by the company, my employment and compensation are "at will", which means that my employment can be terminated, either by the company or me, with or without cause, and with or without notice. I understand that no manager or supervisor has the authority to make any employment agreement with me, either orally or in writing, that is NOT an at-will agreement. Only the President of the Company has the authority to, enter into an employment agreement for any specified period of time, with me.

I give the company permission to conduct any investigation regarding the information contained in my employment application, which the company thinks is necessary to determine my qualifications for assuming a job with the company. I give the company my permission to contact any former employer, school, college or university, utility company, credit or finance bureau or office, any personal or professional reference, or any other appropriate source or individual for the purpose of gathering any information, personal or otherwise, that such sources may have about my character, general reputation, credit education or employment record, and I give my consent to any such source to release to the company whatever information they have about me. I also unconditionally release all named and unnamed sources from any and all liability, which might result from furnishing any information about me.

DATE	SIGNATURE	