

# APPLICATION FOR EMPLOYMENT



## PERSONAL INFORMATION

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ SOCIAL SEC. #: \_\_\_\_\_  
 LAST FIRST M.I.

PRESENT ADDRESS: \_\_\_\_\_  
 STREET CITY STATE ZIP

PERMANENT ADDRESS: \_\_\_\_\_  
 STREET CITY STATE

PHONE #: \_\_\_\_\_ DRIVERS LICENSE #: \_\_\_\_\_

POSITION: \_\_\_\_\_ DATE YOU CAN START: \_\_\_\_\_ SALARY DESIRED: \_\_\_\_\_

ARE YOU EMPLOYED NOW?  YES  NO IF YES, MAY WE CONTACT YOUR CURRENT EMPLOYER?  YES  NO

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE?  YES  NO IF YES, WHEN AND WERE? \_\_\_\_\_

REFERRED BY: \_\_\_\_\_  
 LAST FIRST M.I.

## EDUCATION AND SKILL INFORMATION

EDUCATION	NAME AND LOCATION	SUBJECTS STUDIED	NO. OF YEARS	DID YOU GRADUATE?
HIGH SCHOOL				<input type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE				<input type="checkbox"/> YES <input type="checkbox"/> NO
TRADE SCHOOL				<input type="checkbox"/> YES <input type="checkbox"/> NO

SPECIAL SKILLS, SPECIAL STUDY OR RESEARCH WORK: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

US SERVICE BRANCH: \_\_\_\_\_ RANK: \_\_\_\_\_

CURRENT MEMBERSHIP OF TIN THE NATIONAL GUARD OR RESERVES: \_\_\_\_\_

**FORMER EMPLOYERS** • LIST BELOW THE LAST THREE EMPLOYERS, STARTING WITH THE MOST CURRENT •

MO. AND YEAR	NAME AND LOCATION	SALARY	POSITION	REASON FOR LEAVING
FROM:				
TO:				
FROM:				
TO:				
FROM:				
TO:				

WHICH JOB DID YOU LIKE THE BEST: \_\_\_\_\_

WHAT DID YOU LIKE BEST ABOUT THIS JOB: \_\_\_\_\_

HAVE YOU EVER FILED A SIIS CLAIM?  YES  NO

IF YES, PLEASE DESCRIBE: \_\_\_\_\_

HAVE YOU HAD ANY TRAFFIC VIOLATIONS IN THE LAST 3 YEARS?  YES  NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

**REFERENCES** • GIVE THE NAME OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR •

NAME	ADDRESS	BUSINESS	YEARS

IN CASE OF EMERGENCY NOTIFY: \_\_\_\_\_

NAME ADDRESS PHONE NO.

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETED TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I UNDERSTAND AND AGREE THAT, IF HIRED. MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

SALARY/WAGE: \_\_\_\_\_ POSITION: \_\_\_\_\_ HIRED?  YES  NO START DATE: \_\_\_\_\_



## DRUG & ALCOHOL POLICY

### NOTICE TO APPLICANTS

Artistic Fence Company, Inc. is an equal opportunity employer and does not discriminate against job applicants or employees based on race, color, religion, sex, national origin, disability, age, pregnancy, sexual orientation, genetic information, gender identity or expression, domestic relations, or compensation or wages.

Artistic Fence Company, Inc. has a vital interest in maintaining safe, healthful and efficient working conditions for its customers and employees. Using or being under the influence of drugs and/or alcohol on the job may pose serious safety and health risks not only for the user, but to the public and all those who work with the user. The possession, use or sale of an illegal drug or controlled substance may also pose unacceptable risks to safe, healthful and efficient operations.

To meet this compelling interest, individuals who wish to be considered for employment must agree to **PRE-PLACEMENT DRUG TESTING AND DRUG AND ALCOHOL TESTING DURING EMPLOYMENT.**

By completing and signing the Notice and the attached Application of Employment, the applicant understands and agrees to submit to drug testing as a condition of our employment offer as well as to alcohol and drug testing during the course of employment as provided for in Artistic Fence Company, Inc.'s Drug and Alcohol Policy. The applicant further understands and agrees to release Artistic Fence Company Inc. and its directors, officers, agents, employees, parents, subsidiaries and affiliated concerns from any and all liability, claims, demands, damages and causes of action of every kind and nature arising out of or resulting from or in connection with submitting to drug and alcohol testing and any decision concerning employment made by Artistic Fence Company, Inc. in whole or in part, based upon the results of drug and alcohol testing. Submission of an altered or adulterated specimen or the substitution of a specimen by the supplicant will result in a withdrawal of the employment offer

**ANY APPLICANT WHO IS UNWILLING TO AGREE TO THESE CONDITIONS SHOULD NOT APPLY FOR EMPLOYMENT WITH ARTISTIC FENCE COMPANY, INC.**

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Applicant's Signature

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Date