

**Application For
Employment**

Position _____ NAME _____ Date _____ M/D/Y
Last First Middle I

For Office use only



Personal

Name _____ Soc. Sec. No. _____
 Last First Middle
 Address _____ Telephone: Work _____
 Street City/State Zip Home _____

Are you a citizen of the U.S. or otherwise authorized to work in the U.S.? Yes No

Are there any circumstances which will prevent you from being at work regularly and on time, and to work overtime as required by the company? Yes No — If

“Yes,” please describe _____

In case of emergency notify _____
 Name Address Phone No.

Have you ever been convicted of a felony? Yes No — If “Yes,” please explain _____

Do you have a valid operators license? Yes No

What State is license from? _____ What is license number? _____

Number of days absent from work or school past 12 months? _____

Employment Desired

Position desired _____ Full-time Part-time Summer

Have you been employed previously by Tri-Angle Metal Fab? Yes No — If so, show dates _____

Date available for work? _____ Shift Available _____ Salary desired \$ _____

May we contact your present employer now? Yes No If “No,” when may we contact? _____

How were you referred to Tri-Angle? _____

Names of relatives employed by Tri-Angle _____

Education and Achievements

Schools	Name & Location	Dates Attended		Major Studies	Graduation	
		From	To		Degree	Mo./Yr.
High School						
College, Trade Business						
Post Graduate						
Other						
Other						
Other						

Last grade completed: (Circle One) 4 5 6 7 8 High School 9 10 11 12 College 1 2 3 4 Beyond 5 6 7 8

1. Certification(s) & Specialized Skills: _____

2. School, civic or business activities and offices held (you may exclude those which indicate age, sex, race, color, religion or national origin):

3. Hobbies and leisure time interests: _____

Employment History

A resumé may be attached as a supplement but not in lieu of this section

1. Present or last employer _____ From _____ To _____
 Address _____ Phone _____
 Last position held _____ Supervisor _____ Starting salary \$ _____ Final salary \$ _____
 Duties _____
 Reason for leaving _____

2. Present or last employer _____ From _____ To _____
 Address _____ Phone _____
 Last position held _____ Supervisor _____ Starting salary \$ _____ Final salary \$ _____
 Duties _____
 Reason for leaving _____

3. Present or last employer _____ From _____ To _____
 Address _____ Phone _____
 Last position held _____ Supervisor _____ Starting salary \$ _____ Final salary \$ _____
 Duties _____
 Reason for leaving _____

4. Present or last employer _____ From _____ To _____
 Address _____ Phone _____
 Last position held _____ Supervisor _____ Starting salary \$ _____ Final salary \$ _____
 Duties _____
 Reason for leaving _____

Business References

Name	Affiliation	Phone No.
1. _____	_____	() _____
2. _____	_____	() _____
3. _____	_____	() _____
4. _____	_____	() _____

Applicant's Statement and Agreement

I authorize Tri-Angle to verify all statements contained in this application for employment and to make any reference checks it deems appropriate except as limited above for present employer. I also certify that all information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. By typing my name in to the area provided below, I agree that my electronic signature is the legally binding equivalent to my hand written signature.

Date _____ Signature _____

Tri-Angle Metal Fab Opportunity Policy

Tri-Angle Metal Fab is an Equal Employment Opportunity employer and will not discriminate on the basis of sex, race, creed, color, national origin, age, physical condition, sexual orientation or veteran status.

Employment Record Data (to be completed after hiring)

Start Date	Soc. Sec. No.	Shift	Dep't.	Hourly Rate		
Classification			Classification Code	Marital Status	No. Child	Employee's Birth Date
Supervisor & Date		Dep't. Manager & Date				
<input type="checkbox"/> New Employee <input type="checkbox"/> Rehire	Interviewed By	Date	Approval			