

**APPLICATION FOR EMPLOYMENT**  
**S. I. Of Osceola, Inc. dba Segler Industries**  
**P.O. Box 701336**  
**St. Cloud, FL 34770-1336**  
**(407) 957-3478**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ How long at this address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Phone: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Class: A B C D E

**EMPLOYMENT**

Position applying for: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Date you can start: \_\_\_\_\_ Are you employed now: \_\_\_\_\_

Current employer: \_\_\_\_\_ Phone: \_\_\_\_\_

How long at current job: \_\_\_\_\_ Position: \_\_\_\_\_

**PERSONAL REFERENCES**

(Give the names of three persons not related to you, whom you have known for at least one year.)

Name : \_\_\_\_\_ Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

**APPLICATION FOR EMPLOYMENT**  
**Segler Industries Pg. 2**

**ARE YOU OR HAVE YOU EVER BEEN:**

Convicted of a misdemeanor? ( ) Yes ( ) No                      If so when: \_\_\_\_\_

Nature of infraction: \_\_\_\_\_

Convicted of a felony? ( ) Yes ( ) No                      If so when: \_\_\_\_\_

Nature of infraction: \_\_\_\_\_

Any moving violations or accidents in the past three years? ( ) Yes ( ) No

Describe: \_\_\_\_\_

How many points on your driver's license? \_\_\_\_\_

**RELEASE OF INFORMATION**

The undersigned hereby applies to Segler Industries for employment. It is understood and agreed that the undersigned specifically consents to Segler Industries investigating the undersigned's work history and driver's license report for the purpose of extending an offer for employment. The undersigned hereby holds harmless and releases Segler Industries and former employers, or any person working for said companies from any claim as a result of the release of information.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

**APPLICATION FOR EMPLOYMENT**  
**Segler Industries Pg. 3**

**PREVIOUS EMPLOYMENT**

**Previous employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Previous employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**AUTHORIZATION**

I certify that the facts contained in this application for employment are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application will be grounds for dismissal.

I authorize investigation of all statements contained herein and references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time and to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

**Signature:** \_\_\_\_\_

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

-----**DO NOT WRITE BELOW THIS LINE**-----

**Remarks:** \_\_\_\_\_

**Hired:** ( ) Yes ( ) No **Salary:** \_\_\_\_\_ **Start Date:** \_\_\_\_\_ **Position:** \_\_\_\_\_