

# Employment Application

**Full Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Last First M.I.

**Address:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_  
Street Address Apt. No.  
 \_\_\_\_\_  
City State Zip

**Home Phone** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Social Security #** \_\_\_\_\_

**Position Applied For:** \_\_\_\_\_ **Date Available:** \_\_\_\_\_ **Desired Salary:** \_\_\_\_\_

	<b>YES</b>	<b>NO</b>		<b>YES</b>	<b>NO</b>
Are you a citizen of the United States?	<input type="checkbox"/>	<input type="checkbox"/>	If no, are you authorized to work in the United States?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever worked for this company?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, when?	_____	
Have you ever been convicted of a felony?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, explain:	_____	

**Hours / Days Available to Work:**

Monday     Thursday     Full-Time  
 Tuesday     Friday     Part-Time  
 Wednesday     Saturday     Full or Part-Time

**Were you referred to Burners, Inc.?**  YES  NO  
 If yes, by who? \_\_\_\_\_

Do you have a valid drivers license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	State of issue:	<input type="text"/>
Have you had any accidents in the past 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	<input type="text"/>
Have you had any moving violations in the past 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	<input type="text"/>

**Education**

Type of School	Name of School w/ City & State	No. Years Completed	Major or Degree
High School or Highest Comp			
College / Bus. /Trade School			
Professional School / Other			

**Previous Employment (list up to 3)**

1. **Name of Employer:** \_\_\_\_\_  
**Complete Address:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **May we contact this employer:**  Yes  No  
**Dates of employment:** From: \_\_\_\_\_ To: \_\_\_\_\_ **Salary / Wage** \_\_\_\_\_  
**Name of last supervisor:** \_\_\_\_\_ **Last job title:** \_\_\_\_\_  
**Reason for Leaving (be specific):** \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

2. **Name of Employer:** \_\_\_\_\_  
**Complete Address:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **May we contact this employer:**  Yes  No  
**Dates of employment:** **From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Salary / Wage** \_\_\_\_\_  
**Name of last supervisor:** \_\_\_\_\_ **Last job title:** \_\_\_\_\_  
**Reason for Leaving (be specific):** \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

3. **Name of Employer:** \_\_\_\_\_  
**Complete Address:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **May we contact this employer:**  Yes  No  
**Dates of employment:** **From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Salary / Wage** \_\_\_\_\_  
**Name of last supervisor:** \_\_\_\_\_ **Last job title:** \_\_\_\_\_  
**Reason for Leaving (be specific):** \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

Please use this section to include any additional information that may be helpful to us in considering you for employment, such as computer skills, program experience (ie: Excel, CAD etc.), Machinery / Equipment Previously Operated (ie: Forklift, Drill Press, CNC etc.)

**PLEASE READ CAREFULLY BEFORE SIGNING**

I hereby certify that the information on this application is true and complete to the best of my knowledge and agree that false information or significant omissions may disqualify me from further consideration for employment and may be considered as justification for termination if discovered at a later date.

I agree that my employment can be terminated at any time for any reason by either Burners, Inc. or myself.

I authorize you to make such investigations of my personal, employment, financial and other related matters as they may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application. I also understand that employment is subject to my:

- undergoing a drug and alcohol screening, and periodic testing as directed by management
- completing other post employment records and forms
- providing documents which satisfy the requirements of the Immigration Reform & Control Act of 1986
- submitting to a background check from the city / county of which I reside

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