



Port City Metal Fabrication, LLC.

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pcmfab.com

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

Name: _____ Date of Application: _____
Last First Middle

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____

1. General Information

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation? Yes No

Have you been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying.) Yes No

If yes, explain: _____

2. Education and Training

Circle Last Grade Completed • Grade 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Masters Doctorate

Name and Address of School	Major Course Studied	Graduated or Degree (Y/N)	Average Grade
Last High School Attended			
College/University Attended			
Technical/Vocational/Graduate School Attended			

at any scholarships, academic honors, awards, or special achievements:

3. Skills

Please list any skills you have that are appropriate for the position you are applying for: _____

If required, will you work?

Rotating Shifts Yes No

Saturdays Yes No

Overtime Yes No

Sundays Yes No

Position applying for, be specific: _____ Salary Requirements _____ Date You Can Start _____
 \$ per hour
 per month

State fully why you believe you are qualified for this position. _____

Interests/Accomplishments: You may wish to list significant experience, interests & accomplishments gained while working as a volunteer or as a hobbyist that may be useful in the position(s) you are seeking. Names or organizations designating religion, race, etc. need not be mentioned.

4. Employment History

Starting with your present or most recent employer list in consecutive order all employment for at least the past three employers. If currently employed, may we contact your employer? Yes No

Full Name of Company	Telephone	Salary Begin End	Employed From • To Mo/Yr • Mo/Yr
Street Address/City, State/Zip			
Name of Supervisor:	Title of Your Position:	Reason for Leaving:	
List jobs held, duties performed, skills used, and promotions while employed at this company:			
Full Name of Company	Telephone	Salary Begin End	Employed From • To Mo/Yr • Mo/Yr
Street Address/City, State/Zip			
Name of Supervisor:	Title of Your Position:	Reason for Leaving:	
List jobs held, duties performed, skills used, and promotions while employed at this company:			
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Street Address/City, State/Zip			
Name of Supervisor:	Title of Your Position:	Reason for Leaving:	
List jobs held, duties performed, skills used, and promotions while employed at this company:			

I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references 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 all parties from all liability for any damage that may result from furnishing same to you.

Signature: _____ Date: _____