

All applications must be submitted with a resume and copies of any relevant training, safety and/or equipment handling certifications.

**PERSONAL INFORMATION****Name:**\_\_\_\_\_  
*Last*\_\_\_\_\_  
*First*\_\_\_\_\_  
*Middle***Current Address:**\_\_\_\_\_  
*Street*\_\_\_\_\_  
*City*\_\_\_\_\_  
*State*\_\_\_\_\_  
*Zip Code*

How long have you lived at your current address? \_\_\_\_\_

Phone: (Cell) \_\_\_\_\_

Phone: (Work) \_\_\_\_\_

Email: \_\_\_\_\_

When is the best time to contact you? (days and times) \_\_\_\_\_

**POSITION APPLYING FOR****Position Title:**

\_\_\_\_\_ Desired Pay \$ \_\_\_\_\_

How did you learn of this opening? \_\_\_\_\_

Are you seeking:  Full-time or  Part-time work?

If "Part-time", please specify days and hours \_\_\_\_\_

Have you worked for Wycliffe Enterprises before?  Yes  No If "Yes", when? \_\_\_\_\_Are you willing to travel?  Yes  No If "Yes", what percent? \_\_\_\_\_%Are you a union member?  Yes  No If "Yes", which one? \_\_\_\_\_**WORK AUTHORIZATION**Are you a United States citizen?  Yes  No

Are you legally eligible for employment in the United States?  Yes  No

(If offered employment, verifying documentation is required)

Are you over 18 years of age?  Yes  No If "No", specify age \_\_\_\_\_

## EDUCATION

### High School:

Number of Years Completed (Circle One) 1      2      3      Diploma:  Yes  No      G.E.D.  Yes  No

1. \_\_\_\_\_  
School

\_\_\_\_\_  
Dates Attended City/State

2. \_\_\_\_\_  
School

\_\_\_\_\_  
Dates Attended City/State

### College and/or Vocational School:

1. \_\_\_\_\_  
School

\_\_\_\_\_  
Dates Attended City/State

2. \_\_\_\_\_  
School

\_\_\_\_\_  
Dates Attended City/State

### Other Training or Certifications:

1. \_\_\_\_\_  
Training/Certification

\_\_\_\_\_  
Date Issued City/State

2.

Training/Certification

Date Issued

City/State

3.

Training/Certification

Date Issued

City/State

**EMPLOYMENT HISTORY**

<b>1.</b> Employer	Date Hired	Departure Date	Type of Business
Address	Salary: \$ _____ per _____		
City/State/Zip	Name & Telephone of Last Supervisor:		
Telephone	Title/Position Held		
Reason for Leaving	Duties		

<b>2.</b> Employer	Date Hired	Departure Date	Type of Business
Address	Salary: \$ _____ per _____		
City/State/Zip	Name & Telephone of Last Supervisor:		
Telephone	Title/Position Held		
Reason for Leaving	Duties		

<b>3.</b> Employer	Date Hired	Departure Date	Type of Business
Address	Salary: \$ _____ per _____		
City/State/Zip	Name & Telephone of Last Supervisor:		
Telephone	Title/Position Held		
Reason for Leaving	Duties		

<b>4.</b> Employer	Date Hired	Departure Date	Type of Business
Address	Salary: \$ _____ per _____		
City/State/Zip	Name & Telephone of Last Supervisor:		
Telephone	Title/Position Held		
Reason for Leaving	Duties		

**REFERENCES** (Must be professional contacts who can speak to your work experience and performance.)

<b>1.</b> _____ Name	_____ Relationship
_____ Phone Number	_____ Email Address
<b>2.</b> _____ Name	_____ Relationship
_____ Phone Number	_____ Email Address
<b>3.</b> _____ Name	_____ Relationship
_____ Phone Number	_____ Email Address

## APPLICANT ACKNOWLEDGEMENT

By signing this application, I certify that the information provided is true and complete to the best of my knowledge. I understand that any false statements or misrepresentations may result in disqualification from employment consideration or termination of employment if hired. I authorize Wycliffe Enterprises, Inc to verify information contained in this application, as permitted by law. I further understand that employment, if offered, is at-will and may be terminated by either the employee or the Company at any time, with or without cause or notice, subject to applicable law and written company agreements.

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

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

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

*\*Incomplete applications or missing documentation may delay the review process.*