

# Application for Employment

Cross & Sons prides itself on being an Equal Opportunity Employer. We will not discriminate in employment because of sex, age, race, physical disability, religion, ethnicity, mental disability, marital status, ancestry, or place of origin.

- All information obtained within this application will be held in strict confidence, subject to applicable law.
  - Please print clearly and complete all applicable sections and sign the last page.

### PERSONAL INFORMATION

Name (Last, First, Middle): \_\_\_\_\_ Date: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License Number & State: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business or Alternate Phone: \_\_\_\_\_

Are you legally entitled to work in the United States? Circle one: Yes No Proof will be required upon hire.

Have you been convicted of a felony or misdemeanor within the last 5 years?\* Circle one: Yes No

Please describe: \_\_\_\_\_

\* You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.

Position(s) applied for: \_\_\_\_\_ Date You Can Start: \_\_\_\_\_ Wage Desired: \_\_\_\_\_

Referred by: \_\_\_\_\_ Ever applied to or worked for this company before? Yes No If so, when? \_\_\_\_\_

### EDUCATION RECORD

High School (Name, City, State): \_\_\_\_\_ Graduation (yes or no): \_\_\_\_\_

Business/Technical School (Name, City, State): \_\_\_\_\_

# of Years Completed: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

College (Name, City, State): \_\_\_\_\_

# of Years Completed: \_\_\_\_\_ Degree, Major: \_\_\_\_\_

### EMPLOYMENT HISTORY

LIST BELOW YOUR LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT

**1<sup>ST</sup>** Employer's Name: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer? Yes No (If no, state brief reason): \_\_\_\_\_

**2<sup>ND</sup>** Employer's Name: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer? Yes No (If no, state brief reason): \_\_\_\_\_

**3<sup>RD</sup>** Employer's Name: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact this employer? Yes No (If no, state brief reason): \_\_\_\_\_

**PROFESSIONAL/WORK REFERENCES**

LIST PEOPLE NOT RELATED TO YOU WHO HAVE KNOWLEDGE OF YOUR QUALIFICATIONS FOR THE POSITION FOR WHICH YOU ARE APPLYING. IF APPLYING FOR YOUR FIRST JOB, YOU MAY USE ACADEMIC REFERENCES.

<b>1-Name:</b>	Work Phone:	Home Phone:	
Address:	City:	State:	Zip:
Relationship to You:	Occupation:	Years Acquainted:	
<b>2-Name:</b>	Work Phone:	Home Phone:	
Address:	City:	State:	Zip:
Relationship to You:	Occupation:	Years Acquainted:	
<b>3-Name:</b>	Work Phone:	Home Phone:	
Address:	City:	State:	Zip:
Relationship to You:	Occupation:	Years Acquainted:	

**MILITARY RECORD**

Branch of Service:	Rank:	From:	To:
Present Military Affiliation: National Guard or Reserves <input type="radio"/> Active <input type="radio"/> Inactive			
Kinds of Training & Duties while in Service:			

**OUTSIDE ACTIVITIES**

Excluding those indicating race, color, religion, sex, national origin, age, or handicap.)

Professional memberships, certificates, or licenses held: \_\_\_\_\_

Past & Present Civic or Cultural Activities (include offices held): \_\_\_\_\_

Principal Hobbies: \_\_\_\_\_

**SPECIAL SKILLS**

To be Completed by Applicant for Office/Clerical Work  Active  Inactive

Typing: Yes  No  If Yes, Words per Minute: \_\_\_\_\_ Dictation: Yes  No  If Yes, Words per Minute: \_\_\_\_\_

To be Completed by Applicant for Shop/Service Work

Type of Machines Operated & Years Experience: \_\_\_\_\_

Computer Skills: Hardware: \_\_\_\_\_ Software: \_\_\_\_\_

Served Apprenticeship: Yes  No  If Yes, Type of Apprenticeship: \_\_\_\_\_

Please list any Other Skills and/or Equipment/Production Experience and/or Other Languages not discussed above: \_\_\_\_\_

**PHYSICAL RECORD**

Do you have any physical limitations that preclude you from performing any work for which you are being considered? Yes  No

Please describe: \_\_\_\_\_

In case of Emergency Notify: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ Relationship to You: \_\_\_\_\_

**PLEASE READ AND SIGN**

I hereby state that all information provided is accurate and may be verified by you. I agree that I may be discharged if Cross & Sons at any time learns of falsification or material omission in the information provided on this application form and related documents. Cross & Sons may contact my former employers, as indicated, in connection with the consideration of my employment with them. All references are hereby authorized to release all information which they may have relevant to my employment with Cross & Sons. I hereby release Cross & Sons, its affiliates, successors, and assigns, and all references from any liability that might be claimed because of information provided by such references.

I understand that as a condition of employment I will be required to take and pass a pre-employment drug screen and I hereby state that I have no objections to random drug screenings during my employment. I also understand that if I am applying for a position that requires driving that my motor vehicle record will be reviewed for insurability purposes.

I agree that I will follow all Company policies, rules, procedures, and all other directions pertaining to my employment. I understand that Cross & Sons reserves the right to add, change, and/or delete any policies, procedures, work rules, and/or benefits at any time. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

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