

## EMPLOYMENT APPLICATION



**PERSONAL INFORMATION:**

DATE OF APP:			
FULL NAME:			
SSN:			
DATE OF BIRTH:			
PHONE NUMBER:			
EMAIL ADDRESS:			
ADDRESS:	OKLA. LICENSE #AC440990		
CITY/STATE/ZIP:	BUBBA	ERIC	
	918-740-3299	918-260-5965	
POSITION APPLIED FOR:	33170 E. STATE HWY 51; SUITE A COWETA, OK 74429		
DATE AVAILABLE:			
SALARY DESIRED:		YES	NO
ARE YOU LEGALLY AUTHORIZED TO WORK IN THE US?			
CAN YOU PROVIDE 2 FORMS OF ID? (DL, SS CARD, BIRTH CERT., PASSPORT, ETC.)			
ARE YOU 18 YEARS OF AGE?			
DO YOU CONSENT TO A PHYSICAL EXAM/DRUG TEST/BACKGROUND CHECK?			
HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR?			
IF YES EXPLAIN:			

**EMPLOYMENT HISTORY:**

COMPANY NAME:			SALARY:	
PHONE NUMBER:		SUPERVISOR'S NAME:		
TITLE/DUTIES:				
REASON FOR LEAVING:				
EMPLOYMENT START DATE:		TO:		

COMPANY NAME:			SALARY:	
PHONE NUMBER:		SUPERVISOR'S NAME:		
TITLE/DUTIES:				
REASON FOR LEAVING:				
EMPLOYMENT START DATE:		TO:		

COMPANY NAME:			SALARY:	
PHONE NUMBER:		SUPERVISOR'S NAME:		
TITLE/DUTIES:				
REASON FOR LEAVING:				
EMPLOYMENT START DATE:		TO:		

COMPANY NAME:		SALARY:	
PHONE NUMBER:		SUPERVISOR'S NAME:	
TITLE/DUTIES:			
REASON FOR LEAVING:			
EMPLOYMENT START DATE:		TO:	

<b>EDUCATION/TRAINING:</b>		GED:	
HIGH SCHOOL		GRADUATED:	
COLLEGE/UNIVERSITY			
SPECIALIZED COURSE			

OCCUPATIONAL LICENSE:	

<b>MILITARY EXPERIENCE:</b>	

<b>DRIVER'S LICENSE:</b>	YES	NO
DO YOU HAVE CURRENT DRIVER'S LICENSE?		
DRIVER'S LICENSE NUMBER		STATE
	YES	NO
HAVE YOU ANY ACCIDENTS IN THE PAST 3 YEARS?		
	IF YES, HOW MANY?	
	YES	NO
HAVE YOU HAD ANY VIOLATIONS THE PAST 3 YEARS?		
	IF YES, HOW MANY?	

<b>WORK AVAILABILITY:</b>	YES	NO
ARE YOU WILLING TO TRAVEL FOR WORK & STAY OUT OF TOWN OVERNIGHT?		
	YES	NO
ARE YOU WILLING TO WORK NIGHTS & WEEKENDS IF REQUIRED?		

<b>REFERENCES:</b>			
NAME:		PHONE #	
NAME:		PHONE #	
NAME:		PHONE #	

INFORMATION PROVIDED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE

SIGNATURE:	<input type="text"/>	DATE:	<input type="text"/>
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