

# LIBERTY

# WELDING & IRON WORKS CO.

TODAY'S DATE: \_\_\_\_\_

POSITION APPLYING FOR \_\_\_\_\_

REFERRAL SOURCE

Advertisement  
 Walk-In

Employee  
 Relative

Private Employment Agency  
 Other \_\_\_\_\_

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion, or national origin.

Please fill out information below:

NAME: \_\_\_\_\_  
Last First Middle

SOCIAL SECURITY # \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_  
Street  
City State Zip Code

PREVIOUS ADDRESS \_\_\_\_\_  
(IF LESS THAN TWO (2) YEARS) Street  
City State Zip Code

### MISCELLANEOUS INFORMATION:

LIST ANY SKILLS YOU MAY HAVE (Example: Mechanic, Woodworking, Electrical etc.)  
(Please note if it is a hobby or a past employment)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### REFERENCES

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

NAME	TELEPHONE	YEARS KNOWN
	( )	
	( )	
	( )	

### EMPLOYMENT APPLICATION

#### ADDITIONAL INFORMATION

List any additional information you would like us to consider.


Yes  No  If under 18 years of age, can you provide proof of eligibility to work?

Yes  No  Have you ever applied to us before? If yes when? \_\_\_\_\_

Yes  No  Have you ever been employed with us before? If so, when? \_\_\_\_\_

Yes  No  Do you have a relative or friend employed with us? If yes, who? \_\_\_\_\_

Yes  No  May we contact your present employer?

Yes  No  May we contact you at work?

Yes  No  Have you ever been convicted of a crime (other than a traffic violation)?  
Conviction will not necessarily disqualify you from employment.

Yes  No  If yes, please explain? \_\_\_\_\_

Yes  No  Are you a citizen of the United States?

Yes  No  If no, does your immigration status permit you to work? If hired proof must be provided of: Green card, Visa, Social Security, and/or drivers license.

Yes  No  Are you currently on "layoff" status, subject to recall?

Yes  No  Are you able to meet the attendance requirements of the position?

Yes  No  Will you work overtime if required?

Yes  No  Driver's license number if driving is an essential job function  
State \_\_\_\_\_

**Type of employment desired**

Full time  Part time  Temporary  Seasonal

**Date eligible for work:**

\_\_\_\_\_

<b>EMPLOYMENT HISTORY - THIS INFORMATION MUST BE COMPLETE</b>			
Provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent. Explain any gaps in employment in comments section below.			
EMPLOYER	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
	FROM	TO	
ADDRESS & PHONE NUMBER			
JOB TITLE	HR RATE/SALARY		
	STARTING		
IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HR RATE/SALARY		
	FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	\$	PER	
EMPLOYER	DATES EMPLOYED		SUMMARIZE (See Above)
	FROM	TO	
ADDRESS & PHONE NUMBER			
JOB TITLE	HR RATE/SALARY		
	STARTING		
IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HR RATE/SALARY		
	FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	\$	PER	
EMPLOYER	DATES EMPLOYED		SUMMARIZE (See Above)
	FROM	TO	
ADDRESS & PHONE NUMBER			
JOB TITLE	HR RATE/SALARY		
	STARTING		
IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HR RATE/SALARY		
	FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	\$	PER	
EMPLOYER	DATES EMPLOYED		SUMMARIZE (See Above)
	FROM	TO	
ADDRESS & PHONE NUMBER			

JOB TITLE	HR RATE/SALARY	
	STARTING	
IMMEDIATE SUPERVISOR AND TITLE	\$	PER
REASON FOR LEAVING	HR RATE/SALARY	
	FINAL	
MAY WE CONTACT FOR REFERENCE?	\$	PER
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		

**EMPLOYMENT APPLICATION**

I the undersigned authorize Liberty Welding or its designees to investigate all statements contained in this application. I also authorize and request any and all of my former employers (except as specified above) and any other person, firm, or corporation to furnish any and all information requested by Liberty Welding or its designees concerning my job performance, suitability for employment, job qualifications and personal background, and I hereby release each such employer or other person, firm, or corporation from any and all liability by reason of furnishing the requested information. In addition, if I should become employed by Liberty Welding, I expressly authorize Liberty Welding to release information about my job performance, job qualifications and suitability for employment to any person who may request such information either during my employment or after my employment terminates, and I expressly release Liberty Welding from any liability for disclosing such information.

I the undersigned certify that all the information provided on this application or on attached resume is true, correct and complete. I understand that any misrepresentation or omission of fact contained in this application is cause for my rejection or immediate dismissal if I should become employed. I also understand and agree that, if I should become employed, my employment with Liberty Welding is for no definite time period and may be terminated at any time. Finally, I understand that the completion of this employment application does not indicate that there are positions available and does not obligate Liberty Welding to offer me a position if positions are available.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

All perspective employees are required to undergo a post-offer physical examination, drug/alcohol screen and a job skills demonstration.

I understand that consideration for employment is conditioned upon the results of a reference check; authorizes LIBERTY WELDING to investigate all statements made by the applicant on the application; authorizes LIBERTY WELDING to contact former employees and references; and authorizes contacted persons to respond to questions and releases Liberty Welding and all providers of information from any liability as a result of furnishing and receiving this information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date