ERWIN-KEITH, INC.

APPLICATION FOR EMPLOYMENT

PERSONAL

PLEASE PRINT OR TYPE

LAST NAME	FIRST NAME	MIDDLE NAME	HOME PHONE	CELL PHONE

CURRENT ADDRESS (STREET, CITY, STATE, AND ZIP CODE)	DATE OF BIRTH

SOCIAL SECURITY #	ARE YOU 18 YEAR'S OF AGE OR OVER? ☐ YES ☐ NO	ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? ☐ YES ☐ NO

POSITION APPLYING FOR

FOR WHAT POSITION ARE YOU APPLYING?	ARE YOU APPLYING FOR ☐ FULL TIME ☐ PART-TIME	DATE AVAILABLE
SALARY DESIRED?		

HAVE YOU EVER WORKED FOR ERWIN-KEITH, INC? ☐ YES ☐ NO

IF YES, DATES: From _____ To: _____

WHAT PROMPTED YOU TO APPLY AT ERWIN-KEITH, INC?

☐ ADVERTISEMENT ☐ JOB/FAIR ☐ WORD OF MOUTH ☐ OTHER_____

☐ REFERRAL REFERRED BY:_____

WORK HISTORY

ARE YOU PRESENTLY EMPLOYED? ☐ **YES** ☐ **NO** **MAY WE CONTACT PRESENT EMPLOYER?** ☐ **YES** ☐ **NO**

PRESENT OR MOST RECENT EMPLOYER	TYPE OF BUSINESS	PHONE NO.	MANAGER'S NAME

ADDRESS (STREET, CITY, STATE, ZIP CODE)	DATE EMPLOYED _____ TO _____	ENDING SALARY OR WAGE

POSITION HELD AND NATURE OF DUTIES

REASON FOR LEAVING OR SEEKING CHANGE OF POSITION

NEXT PREVIOUS EMPLOYER	TYPE OF BUSINESS	PHONE NO.	MANAGER'S NAME

ADDRESS (STREET, CITY, STATE, ZIP CODE)	DATE EMPLOYED _____ TO _____	ENDING SALARY OR WAGE

POSITION HELD AND NATURE OF DUTIES

REASON FOR LEAVING OR SEEKING CHANGE OF POSITION

NEXT PREVIOUS EMPLOYER	TYPE OF BUSINESS	PHONE NO.	MANAGER'S NAME

ADDRESS (STREET, CITY, STATE, ZIP CODE)	DATE EMPLOYED _____ TO _____	ENDING SALARY OR WAGE

POSITION HELD AND NATURE OF DUTIES

REASON FOR LEAVING OR SEEKING CHANGE OF POSITION

NEXT PREVIOUS EMPLOYER	TYPE OF BUSINESS	PHONE NO.	MANAGER'S NAME
ADDRESS (STREET, CITY, STATE, ZIP CODE)		DATE EMPLOYED _____ TO _____	ENDING SALARY OR WAGE
NATURE OF DUTIES			
REASON FOR LEAVING OR SEEKING CHANGE OF POSITION			

JOB RELATED ACTIVITIES/EXPERIENCES

LIST ANY ACTIVITIES, EXPERIENCES, ACHIEVEMENTS, OR OTHER SPECIAL SKILLS NOT MENTIONED ELSEWHERE THAT RELATE TO THE POSITION(S) FOR WHICH YOU ARE APPLYING.

EDUCATION

HIGH SCHOOL

SCHOOL OR INSTITUTION	LOCATION	HIGH SCHOOL DIPLOMA OR GED

COLLEGE, UNIVERSITY, OR VOCATIONAL /TECHNICAL

NAME OF INSTITUTION		LOCATION
DID YOU GRADUATE? ☐ YES ☐ NO	DEGREE OR CERTIFICATE GRANTED	MAJOR AND MINOR OR OTHER COURSE OF STUDY
PRIMARY AREAS OF STUDY		

NAME OF INSTITUTION		LOCATION
DID YOU GRADUATE? ☐ YES ☐ NO	DEGREE OR CERTIFICATE GRANTED	MAJOR AND MINOR OR OTHER COURSE OF STUDY
PRIMARY AREAS OF STUDY		

NAME OF INSTITUTION		LOCATION
DID YOU GRADUATE? ☐ YES ☐ NO	DEGREE OR CERTIFICATE GRANTED	MAJOR AND MINOR OR OTHER COURSE OF STUDY
PRIMARY AREAS OF STUDY		

LIST OTHER COURSES OR TRAINING RELATED TO THE POSITION FOR WHICH YOU ARE APPLYING:

GENERAL INFORMATION

HAVE YOU EVER BEEN CONVICTED, OR PLED GUILTY OR NO CONTEST TO A FELONY OFFENSE, OR BEEN CONVICTED IN A SPECIAL OR GENERAL COURT-MARTIAL? (A CONVICTION WILL NOT NECESSARILY DISQUALIFY YOU FROM EMPLOYMENT)

☐ YES ☐ NO IF YES, GIVE DATE AND EXPLAIN

DATE _____

EXPLANATION _____

_____

REFERENCES - PROVIDE THE NAMES AND TELEPHONE NUMBERS OF THREE BUSINESS REFERENCES (NOT RELATIVES OR FRIENDS).

Name: _____ Work # _____ Cell # _____

Relationship: _____

Name: _____ Work # _____ Cell # _____

Relationship: _____

Name: _____ Work # _____ Cell # _____

Relationship: _____

AUTHORIZATION AND ACKNOWLEDGEMENT

I CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS TRUE AND ACCURATE. I UNDERSTAND THAT THIS APPLICATION BECOMES PART OF MY EMPLOYMENT RECORD AND THAT ANY FALSE INFORMATION MAY RESULT IN MY IMMEDIATE DISCHARGE.

I AUTHORIZE AN INQUIRY TO BE MADE ON THE INFORMATION CONTAINED IN THIS APPLICATION IF I AM CONSIDERED FOR EMPLOYMENT.

THE EMPLOYERS, PERSONAL REFERENCES, AND EDUCATIONAL INSTITUTIONS NAMED HEREIN ARE AUTHORIZED TO GIVE INFORMATION ABOUT ME. I HEREBY RELEASE THEM FROM ALL LIABILITY FOR ISSUING SUCH INFORMATION.

I UNDERSTAND AND ACKNOWLEDGE THAT IF ANY MISREPRESENTATION OR OMISSION OF MATERIAL FACT HAS BEEN MADE BY ME OR THE RESULTS OF AN INVESTIGATION ARE NOT SATISFACTORY FOR ANY REASON, ANY CONSIDERATION, OFFER, OR ACTUAL EMPLOYMENT BY THE COMPANY MAY BE TERMINATED IMMEDIATELY WITHOUT OBLIGATION OR LIABILITY TO ME OTHER THAN PAYMENT AT THE RATE AGREED UPON, FOR SERVICE ACTUALLY RENDERED FOR THE PERIOD OF TIME I WAS EMPLOYED.

I UNDERSTAND THAT I WILL BE REQUIRED TO UNDERGO BLOOD AND/OR URINALYSIS TESTING FOR CONTROLLED SUBSTANCES AS PART OF THE APPLICATION PROCESS AND AS A CONDITION OF MY EMPLOYMENT. I FURTHER UNDERSTAND IF I TEST POSITIVE FOR A CONTROLLED SUBSTANCE, EXCEPT IN SUCH INSTANCES WHERE THE SUBSTANCE IS PRESENT PURSUANT TO A CURRENT PHYSICIAN'S PRESCRIPTION, I WILL NOT BE HIRED, OR IF ALREADY WORKING, MY EMPLOYMENT WILL BE TERMINATED.

I UNDERSTAND THAT NEITHER THE GRANTING OF AN INTERVIEW NOR ANYTHING CONTAINED IN THIS APPLICATION, COMPANY POLICIES, PROCEDURES, OR HANDBOOKS THAT I MIGHT RECEIVE, ARE INTENDED TO CREATE AN EMPLOYMENT CONTRACT BETWEEN THE COMPANY AND ME. NO PROMISES REGARDING EMPLOYMENT HAVE HAVE BEEN MADE TO ME AND I UNDERSTAND THAT NO SUCH PROMISE OR GUARANTEE IS BINDING UPON ERWIN-KEITH, INC. UNLESS MADE IN WRITING BY THE HUMAN RESOURCES DEPARTMENT. I UNDERSTAND THAT IF HIRED MY EMPLOYMENT IS FOR NO DEFINITE PERIOD OF TIME AND THAT EITHER I OR ERWIN-KEITH, INC MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY REASON. I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY.

ERWIN-KEITH, INC IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE IN HIRING OR EMPLOYMENT ON ANY BASIS PROHIBITED BY LAW.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS.

APPLICANT'S SIGNATURE _____ DATE _____