



APPLICATION FOR EMPLOYMENT
(Equal Employment Opportunity Employer)

GENERAL

NAME _____

ADDRESS _____

HOME PHONE (____) _____ - _____ CELL PHONE (____) _____ - _____

EMAIL _____

DATE AVAILABLE FOR EMPLOYMENT _____

Position(s) applying for: _____

Are you available to work: FULL-TIME PART-TIME OVER-TIME

If applying for a job requiring driving - Do you have a valid driver's license in this state? YES NO

Can you perform the essential functions of the job for which you are applying either with or without reasonable accommodations? YES NO

Have you ever applied for this company? YES NO

EDUCATIONAL BACKGROUND

Type of School	Name and City	Did you Graduate?	Course or Major
High School			
College			
Technical College			
Other			

SPECIAL SKILLS, QUALIFICATIONS AND CONSIDERATIONS

Summarize special skills and qualifications, volunteer activities, military experience, employment, professional organizations or other activities related to the job you are seeking:

Professional Licenses, Certifications or Registrations:

REFERENCES

(List three (3) non-relatives who are familiar with your qualifications and actual work history and ability.)

	<u>Name</u>	<u>Relationship</u>	<u>Years Known</u>	<u>Telephone</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

EMPLOYMENT EXPERIENCE

Are you employed now? YES NO

May we contact your present employer? YES NO

If yes, give name and phone number: _____
(Start with your present or last job. List your last four (4) jobs in order. Do not omit any job.)

Employer

Your Job Position/Title

Address

City/State

Supervisor's Name

Telephone Number

May we contact this employer? Yes No Your Salary: Starting _____ Ending _____

Employed From: _____ (mo/yr) to _____ (mo/yr)

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

Employer

Your Job Position/Title

Address

City/State

Supervisor's Name

Telephone Number

May we contact this employer? Yes No Your Salary: Starting _____ Ending _____

Employed From: _____ (mo/yr) to _____ (mo/yr)

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

Employer

Your Job Position/Title

Address

City/State

Supervisor's Name

Telephone Number

May we contact this employer? Yes No Your Salary: Starting _____ Ending _____

Employed From: _____ (mo/yr) to _____ (mo/yr)

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

Employer

Your Job Position/Title

Address

City/State

Supervisor's Name

Telephone Number

May we contact this employer? Yes No Your Salary: Starting _____ Ending _____

Employed From: _____ (mo/yr) to _____ (mo/yr)

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

YES NO

If hired I will be responsible for familiarizing myself with all rules and regulations of the Company as they presently exist or are later modified. *If hired I recognize that my employment can be terminated, at the discretion of the Company or at my option, without notice, at any time, with or without reason, except as specifically set forth in writing in a current individual employment agreement.*

YES NO

I also understand that no representative of the Company has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current written agreement signed by the President.

YES NO

I understand this application is not an offer of employment and no promises or representations of employment have been made to me at this time.

YES NO

I understand that this application is only being considered for the specific position for which I applied.

YES NO

I have read, understand, and agree with the above.

Signature of Applicant

Date

Once application is completed, scan and email to hr@vtekusa.com.