

# Application for Employment

LABARGE COATING, LLC

The following information is requested in order to help us make the best possible placement within the Company. All portions of this application must be completed. The Company, in accordance with State and Federal Laws, does not discriminate on the basis of race, sex, religion, national origin, age, marital status, physical or mental handicap or disability.

Please Print

Position(s) Applied For \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

Referral Source  Advertisement  Employee  Relative  Government Employment Agency  
 Walk-in  Private Employment Agency  Other

Name of Source (If Applicable) \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Telephone Number \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Area Code

If necessary, best time to call you at home is \_\_\_\_\_

May we contact you at work? \_\_\_\_\_  YES  NO

If yes, work number and best time to call \_\_\_\_\_ ( ) \_\_\_\_\_  
Area Code Time

If you are under 18, can you furnish a work permit? \_\_\_\_\_  YES  NO

Have you filed an application here before? \_\_\_\_\_  YES  NO

If yes, give date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Have you ever been employed here before? \_\_\_\_\_  YES  NO

If yes, give dates \_\_\_\_\_ From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Are you legally eligible for employment in this country? \_\_\_\_\_  YES  NO

(Proof of U.S. Citizenship or immigration status will be required upon employment)

Date available for work \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Type of employment desired  Full Time  Part Time  Temporary  Seasonal  Educational Co-Op

Are you on lay-off and subject to recall? \_\_\_\_\_  YES  NO

Will you relocate if job requires it? \_\_\_\_\_  YES  NO Will you travel if job requires it? \_\_\_\_\_  YES  NO

Are you able to meet the attendance requirements of the position? \_\_\_\_\_  YES  NO

Have you ever been bonded? \_\_\_\_\_  YES  NO

Have you been convicted of a felony in the last seven (7) years? \_\_\_\_\_  YES  NO

(Such conviction may be relevant if job related, but does not bar you from employment)

If YES, please explain: \_\_\_\_\_

Driver's license number (if required by job) \_\_\_\_\_ State \_\_\_\_\_

# Educational Background

A. List last three (3) schools attended, *starting with last one*. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank and E. major and minor field of study (if applicable).

A. School	B. No. Years Completed	C. Degree Diploma	D. GPA Class Rank	E. Major	F. Minor

List any foreign language(s) and check the box that best describes your skill level

Language	Read and Write	Read and Speak	Read Only	Speak Only

## 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 professional references who are not related to you.

Name	Telephone	Years Known
	(   ) -   -   -	
	(   ) -   -   -	
	(   ) -   -   -	

List professional, trade, business, or civic associations and any offices held. (Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or other protected status.)

Organization	Offices Held

List special accomplishments, publications, awards. (Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or other protected status.) \_\_\_\_\_

List any additional information you would like us to consider: \_\_\_\_\_

# Employment

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comments section below.

Employer	Telephone ( ) -	Dates Employed		Summarize the nature of the work performed and job responsibilities:
		From	To	
Address				
Job Title		Hourly Rate / Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for Leaving		Hourly Rate / Salary		
		Final		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
Employer	Telephone ( ) -	Dates Employed		Summarize the nature of the work performed and job responsibilities:
		From	To	
Address				
Job Title		Hourly Rate / Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for Leaving		Hourly Rate / Salary		
		Final		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
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Job Title		Hourly Rate / Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for Leaving		Hourly Rate / Salary		
		Final		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	

Comments (including explanation of any gaps in employment) \_\_\_\_\_

**Skills and Qualifications.** Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with our company.

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I understand that nothing contained in this application or in the granting of an interview creates a contract between the Company and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon the Company unless made in writing by the President or Vice President. If an employment relationship is established, I acknowledge that no consideration has been furnished to the Company for my employment other than my services, and I understand I have the right to terminate my employment at any time and that the Company has the same right. I agree to abide by the Company's rules and regulations if hired. The information on this application is complete and true to the best of my knowledge, and I hereby authorize the Company to contact any and all references for further information concerning my suitability for employment. I understand that an offer of employment will be contingent upon satisfactory completion of a pre-employment drug test and pre-employment medical examination; I will not be employed unless I am medically qualified for the position. I understand any offer of employment is contingent upon successful completion of the background check process.

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Authorization signature of applicant

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Date