



Themed Environments

**APPLICATION FOR EMPLOYMENT**

<b>PERSONAL INFORMATION</b>					Date
Name				Social Security Number	
Last		First		Middle	
Present Address					
Street		City		State Zip	
Permanent Address					
Street		City		State Zip	
Phone Number			ARE YOU 18 YEARS OR OLDER ? YES NO		
ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES NO					
<b>EMPLOYMENT DESIRED</b>					
POSITION			DATE YOU CAN START		WAGE DESIRED
ARE YOU EMPLOYEED NOW?			IF SO MAY WE INQUIRE WITH PRESENT EMPLOYER?		
EVER APPLIED TO THIS COMPANY BEFORE?			WHERE?		WHEN?
REFERRED BY					
<b>EDUCATION</b>	Name and location of school	No. of years attended	Did you graduate?	Subjects studied	
GRAMMAR SCHOOL					
HIGH SCHOOL					
COLLEGE					
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL					
<b>GENERAL</b>					
SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK					
SPECIAL SKILLS					
ACTIVITIES: (CIVIC, ATHLETIC, ETC.)					
<small>EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS</small>					
U.S. MILITARY OR NAVAL SERVICE	RANK		Present Membership in National Guard Y N		
We are a free drug company. You'll be required to pass a drug test. Somos una compañía libre de drogas. Ud deberá pasar un examen de drogas.			This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.		

# EMPLOYMENT HISTORY

Please list below your last three employers beginning with the most recent

DATE	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
From:				
To:				
From:				
To:				
From:				
To:				
From:				
To:				

WHICH OF THESE JOBS DID YOU LIKE BEST AND WHY?

**REFERERENCES;** GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	PHONE NUMBER	RELATION	YEARS ACQUANTED
1			
2			
3			

**Authorization for Court Records Check**

**Carefully read the following statements before signing:**

I, \_\_\_\_\_ hereby authorize Edge Concrete or its representatives by my signature below, to obtain any information pertaining to my court, driving, law enforcement, and military records. This release is executed with my full knowledge and understanding. I hereby release Edge Concrete, its directors, officers and employees, its representatives and any third party persons from any and all liability for damages or whatever kind which may at any time result to myself, my heirs, family, or associates because of compliance with this authorization or any attempt to comply with it.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Office Use Only*

Interviewed By: _____	Date: _____	
Remarks: _____		
Hired? YES      NO	Position: _____	Dept.: _____
Salary/ Wage: _____	Date Reporting for Work: _____	