



# TRI-STATE INDUSTRIES, INC.

## Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status

(Please Print)

Position applied for \_\_\_\_\_ Date of Application \_\_\_\_\_

How did you learn about us? Newspaper Ad \_\_\_\_\_ Employment Agency \_\_\_\_\_ Friend \_\_\_\_\_ Relative \_\_\_\_\_

NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_ Last 4 of SS# \_\_\_\_\_

ARE YOU 18 OR OLDER? YES \_\_\_\_\_ NO \_\_\_\_\_ BIRTHDATE (optional) \_\_\_\_\_

Married \_\_\_\_\_ Single \_\_\_\_\_

DO YOU HAVE A VALID DRIVERS LICENSE? YES \_\_\_\_\_ NO \_\_\_\_\_ LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

Do you carry an SR22 on file with your insurance? YES \_\_\_\_\_ NO \_\_\_\_\_

Please list all traffic violations for the past 3 years:

Have you ever been employed with us before? YES \_\_\_\_\_ NO \_\_\_\_\_

Have you ever been convicted of a felony? YES \_\_\_\_\_ NO \_\_\_\_\_ If yes, what for \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or immigration status? YES \_\_\_\_\_ NO \_\_\_\_\_

(Proof of citizenship or immigration status will be required upon employment.)

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

Do you have transportation to and from work regardless of hour? YES \_\_\_\_\_ NO \_\_\_\_\_

Are you currently employed? YES \_\_\_\_\_ NO \_\_\_\_\_

May we contact your present employer? YES \_\_\_\_\_ NO \_\_\_\_\_

Can you travel if a job requires it? YES \_\_\_\_\_ NO \_\_\_\_\_

Do you have current Safeland training? YES \_\_\_\_\_ NO \_\_\_\_\_

Date available for work \_\_\_\_\_ Rate of Pay Expected \_\_\_\_\_

### **WORK EXPERIENCE** (start with your present or most current job)

EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ POSTION HELD \_\_\_\_\_

DATES EMPLOYED-FROM \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

RATE OF PAY-STARTING \_\_\_\_\_ FINISH \_\_\_\_\_ DUTIES \_\_\_\_\_

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EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ POSTION HELD \_\_\_\_\_

DATES EMPLOYED-FROM \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

RATE OF PAY-STARTING \_\_\_\_\_ FINISH \_\_\_\_\_ DUTIES \_\_\_\_\_

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EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ POSTION HELD \_\_\_\_\_

DATES EMPLOYED-FROM \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

RATE OF PAY-STARTING \_\_\_\_\_ FINISH \_\_\_\_\_ DUTIES \_\_\_\_\_

## **EDUCATION/TRAINING**

HIGHEST GRADE COMPLETED \_\_\_\_\_

SPECIAL TRAINING OR EQUIPMENT OPERATING THAT MAY MAKE YOU MORE ELIGIBLE FOR THE JOB

\_\_\_\_\_  
\_\_\_\_\_

CONSTRUCTION EXPERIENCE (If any) \_\_\_\_\_

WHAT LANGUAGES ARE YOU FLUENT IN (Check all that apply) \_\_\_ ENGLISH \_\_\_ SPANISH \_\_\_ GERMAN

**Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

Are you capable of performing in a reasonable manner, with or without accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in the position and the hours have been given.

YES \_\_\_\_\_ NO \_\_\_\_\_

## **PERSONAL REFERENCES** (These should not be previous employers, supervisors or family members)

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

Do you have any of the necessary safety equipment? (Check all that apply)

Steel Toed Boots \_\_\_\_\_  
Fire Retardant Clothing \_\_\_\_\_

I understand that I have a pre-employment drug test as a job applicant, I am required to pass a drug and/or alcohol test and that if I fail such a test I will be denied employment. I also understand that successful completion of any requested drug testing does not insure automatic employment with the company. \_\_\_\_\_ (initials)

## **APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 30 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "*at will*" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE