



Interview Date	Employee #
Interviewed By	Pay Rate
Hire Date	Approved By

CONTACT INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Other Phone: _____

Position(s) applied for: _____ Date Available: _____

Lowest acceptable wage: \$. per Are you at least 18? YES NO *If no, birth date: / /

Are you legally eligible to hold employment in the United States? YES NO

Have you ever worked for **Managed Pay** or **Curtis Steel** in the past? YES NO * If yes, from / -to- /

Are you known by any other name(s)? YES NO *If yes, what name(s) _____

WORK AVAILABILITY

For what are you applying? (check all that apply) Full Time Part Time Temporary Days Weekends All

(PLEASE LIST HOURS AND DAYS AVAILABLE TO WORK BELOW)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From							
To							

EDUCATION

Type of School	Name	City	State	Diploma/Degree	Major/Course of Study
High School				<input type="checkbox"/> YES <input type="checkbox"/> NO	
College				<input type="checkbox"/> YES <input type="checkbox"/> NO	
Technical, trade, graduate or other				<input type="checkbox"/> YES <input type="checkbox"/> NO	

List any additional or special education, training, skills, or machines operated: _____

Have you ever been convicted of attempting to commit, or committing any crime other than a minor traffic violation? YES NO

*If Yes, including date(s), please explain: _____

Please Note: A conviction record will not necessarily bar individuals from employment. You are not required to reveal records that have been judicially expunged, sealed, or eradicated.

REFERENCES

Please list three (3) references who have worked with you, and who are well acquainted with your qualifications:

Name	Occupation	Phone

EMPLOYMENT HISTORY

Please list all jobs and activities, which indicate your qualifications including military service, schooling, part-time employment while in school. Employment and periods of unemployment for the past seven (7) years. Attach a separate sheet if necessary. Begin with the most recent employer. Information is subject to verification. *A resume MAY NOT be submitted as a substitute to filling out this section.

If currently employed, may we contact your employer? [] YES [] NO

Company Name: _____ Position/Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Dates Employed: From / -To- / Starting Pay: \$ -per- Ending Pay: \$ -per-
Supervisor's Name: _____ Title: _____ Phone: _____
Responsibilities: _____
Reason for leaving: _____
If time elapsed between positions, please explain: _____

Company Name: _____ Position/Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Dates Employed: From / -To- / Starting Pay: \$ -per- Ending Pay: \$ -per-
Supervisor's Name: _____ Title: _____ Phone: _____
Responsibilities: _____
Reason for leaving: _____
If time elapsed between positions, please explain: _____

Company Name: _____ Position/Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Dates Employed: From / -To- / Starting Pay: \$ -per- Ending Pay: \$ -per-
Supervisor's Name: _____ Title: _____ Phone: _____
Responsibilities: _____
Reason for leaving: _____
If time elapsed between positions, please explain: _____

Company Name: _____ Position/Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Dates Employed: From / -To- / Starting Pay: \$ -per- Ending Pay: \$ -per-
Supervisor's Name: _____ Title: _____ Phone: _____
Responsibilities: _____
Reason for leaving: _____
If time elapsed between positions, please explain: _____

Immigration Act

I understand that, if hired, I will be required to offer examination documents proving that I am a United States Citizen or an Alien Resident currently authorized to work in the US. I also understand that my continued employment is contingent upon my proving the necessary documentation within the prescribed time frames.

Acknowledgement _____ Date _____
Applicant's Signature

READ CAREFULLY BEFORE SIGNING

I hereby certify, to the best of my knowledge, that the answers given are true and complete. I also understand that an omission or falsification may disqualify me from consideration for employment or may be grounds for my immediate dismissal. I agree to conform to the rules and regulations of the company and, if employed, I understand and agree that my employment is at-will and that no employment contract rights have been created. I also understand and agree that my employment may be terminated at any time with or without cause and with or without advanced notice at the option of either the company or myself.

I understand that no supervisor, manager or other representative of the company has any authority to enter into any express or implied contract for employment for any specific period of time. Any agreement contrary to the above must be in writing and expressly state that it is a contract and be signed by the authorized representative of the company. I agree to a background check, physical examination, if requested, and understand that failure to meet any medical and/or health requirements for the position may prevent my employment with the company (the aforementioned administered in accordance with state and federal laws). I also understand that employment, for certain positions, will be conditional upon successful completion of a substance abuse screening test as part of the company's pre-employment policy.

Acknowledgement _____ Date _____
Applicant's Signature