

116 Industrial Canal Road East

Mobile, AL 36603

## **APPLICATION FOR EMPLOYMENT**

### **APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

PRINT ALL INFORMATION RE UESTED EXCEPT SIGNATURE

Date:

PLEASE COMPLETE ALL PAGES

| Last Name:                |                | First Name:     |                              | Middle Initial: |
|---------------------------|----------------|-----------------|------------------------------|-----------------|
| Present Address:          |                |                 |                              |                 |
| City/State/Zip:           |                |                 |                              |                 |
| Telephone:                |                | Social Security | / # <sup>.</sup>             |                 |
| Position(s) Applied For   |                |                 |                              |                 |
| Salary Desired:           | per day/hour   |                 |                              |                 |
| When are you available to | o start work?  |                 |                              |                 |
|                           |                | EDUCATI         | ON                           |                 |
| TYPE OF SCHOOL            | NAME OF SCHOOL | LOCATION        | NUMBER OF YEARS<br>COMPLETED | MAJOR/DEGREE    |
| High School               |                |                 |                              | ;               |
| College                   |                |                 |                              |                 |
| Business/Trade<br>School  |                |                 |                              |                 |
| Professional<br>School    |                |                 |                              | ł               |

#### HAVE YOU EVER BEEN CONVICTED OF A CRIME

If yes, explain the number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

| M | ILI | TA | RY |
|---|-----|----|----|
|   |     |    |    |

HAVE YOU EVER NEEM IN THE ARMED FORCES?

ARE YOU CURRENTLY A MEMBER OF THE NATIONAL GUARD?

Specialty \_\_\_\_\_

Date Entered

Date of Discharge

## WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give business name. Attach additional sheets if necessary.

| Name of<br>Employer: | Name of<br>Supervisor: | Employment dates | Pay/Salary |
|----------------------|------------------------|------------------|------------|
|                      |                        | From:            | Start:     |
| Address:             |                        | То:              | Final:     |
| City, State, Zip:    |                        |                  |            |
|                      |                        |                  |            |

Reason for leaving (be specific)

List the jobs you held duties performed skills used or learned advancements or promotions while you worked at this company

# WORK EXPERIENCE

|   | Reason for leaving (be specific)<br>List the jobs you held, duties perfor<br>worked at this company. |                        | Name of<br>Supervisor:<br>or learned, adva | Employment<br>dates<br>From:<br>To: | Start:<br>Final:               |
|---|--|------------------------|--|-------------------------------------|--------------------------------|
| Name of<br>Employer:<br>Address:<br>City, State, Zip: | Reason for leaving (be specific)   |                        | Name of<br>Supervisor:                     | Employment<br>dates<br>From:<br>To: | Pay/Salary<br>Start:<br>Final: |
|   | List the jobs you held, duties perform<br>worked at this company.                                    | med, skills used       | or learned, adva                           | ncements or pro                     | omotions while you             |
| Name of<br>Employer:<br>Address:<br>City, State, Zip: |  | Name of<br>Supervisor: | Employ<br>From:<br>To:                     | vment dates                         | Pay/Salary<br>Start:<br>Final: |
| Reason for leaving (                                  | be specific)   |                        |  |                                     |                                |

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

| DO YOU HAVE A DRIVER'S LICENSE?                                       |   |                                     |  |  |
|---|---|-------------------------------------|--|--|
| What is your means of transportation to work?                         |   |                                     |  |  |
| State of Issue:   |   |                                     |  |  |
|   |   |                                     |  |  |
| Please list two references other than relatives or revious employers. |   |                                     |  |  |
| Name:   |   |                                     |  |  |
| Company:  |   |                                     |  |  |
| Address:  |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   | <b>loyers.</b><br>Name:<br>Company:<br>Address:<br>Telephone: | <b>loyers.</b><br>Name:<br>Company: |  |  |

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

I attest that all of the information that I have provided on this application is true and correct.

Signature:

Date: \_\_\_\_