A-1 GLASS INC. Application for Employment

Date of Application Trade License# _		Date of Birth	
Name			
Address Telephone	Social S	Security No.	
	Social S	Security No	
Are you employed now?	May we contact your present employer?		
On what date would you be ab	ble to work?	Position applying for:	
Are you on lay-off and subject			
Can you travel if a job require			
Give name, address and teleph	none number of three references	who are not related to you and are not	
previous employers.			
I I I I I I I I I I I I I I I I I I I			
Employment Experience (start with your present job)			
Employer	Telephone	Dates Employed	
Address		I J J	
Job Title		Hourly Rate/Salary	
Supervisor			
Reason for Leaving			
Employer	Telephone	Dates Employed	
Address			
Job Title		_ Hourly Rate/Salary	
Supervisor			
Reason for Leaving		·	
Employer	Telephone	Dates Employed	
Address	i elephone		
Job Title		Hourly Rate/Salary	
Supervisor			
Reason for Leaving			
Employer	Telephone	Dates Employed	
Address	····F	F . J	
Lab Title		Hourly Rate/Salary	
Supervisor			
Reason for Leaving			
Treason for Louving			

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Special Skills and Qualifications

Education	Elementary	High	College/ University
School Name Years Completed			
Diploma/ Degree			

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for an 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 45 day. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at this time.

The applicant understands that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that affect is executed by the employer and employee in writing.

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

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT ONLY

Position(s) Applied For Is Open:	Yes	No
Position(s) Considered For:		

Date _____