

EMPLOYMENT APPLICATION (PLEASE PRINT)

APPLICANT INFORMATION

Last Name	First	M.I.	
Street Address		Apartment/Unit #	
City	State	ZIP	
Date Available	Desired Position	E-Mail Address	
Social Security No.	Home Phone	Cell/Other Phone	

Are you over 18 years of age?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you ever served in the armed service of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when & for what Supervisor?		
Have you ever been convicted of a felony? (other than a minor traffic violation)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

NOTE: A conviction record will not necessarily bar employment, as the company will evaluate the nature of the offense, its seriousness, length of time since the offence & rehabilitation.

TRAINING

Do you have a TWIC card?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If not, would you be able/willing to enroll in the TWIC program?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you have current Basic Plus Training?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	It's a requirement that all employees working within a Petrochemical Facility read, write & understand English. Do you meet this requirement? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Do you have other site specific training?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Type:		
Date Issued:					

REFERENCES (List 3 personal references – NOT RELATIVES OR EMPLOYERS.)

Name	Relationship
Company	Phone ()
Name	Relationship
Company	Phone ()
Name	Relationship
Company	Phone ()

POSITIONS BEST QUALIFIED FOR (Please Check ALL that Apply):

carpenter <input type="checkbox"/>	blade operator <input type="checkbox"/>	structural welder <input type="checkbox"/>	electrician <input type="checkbox"/>	timekeeper <input type="checkbox"/>
concrete finisher <input type="checkbox"/>	excavator operator <input type="checkbox"/>	iron worker <input type="checkbox"/>	instrumentation <input type="checkbox"/>	mechanic <input type="checkbox"/>
rod buster <input type="checkbox"/>	dozer operator <input type="checkbox"/>	pipe welder <input type="checkbox"/>	millwright <input type="checkbox"/>	_____ <input type="checkbox"/>
helper <input type="checkbox"/>	backhoe operator <input type="checkbox"/>	pipe fabricator <input type="checkbox"/>	scaffold builder <input type="checkbox"/>	_____ <input type="checkbox"/>
laborer <input type="checkbox"/>	crane operator <input type="checkbox"/>	rig welder <input type="checkbox"/>	insulator <input type="checkbox"/>	_____ <input type="checkbox"/>

A high percentage of our work is out of town, are you able/willing to travel? YES NO

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PREVIOUS EMPLOYMENT

May we contact your previous supervisors for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company (1)			Phone ()		
Address			Supervisor		
Job Title		Starting Salary \$		Ending Salary \$	
From	To	Reason for Leaving			
Company (2)			Phone ()		
Address			Supervisor		
Job Title		Starting Salary \$		Ending Salary \$	
From	To	Reason for Leaving			
Company (3)			Phone ()		
Address			Supervisor		
Job Title		Starting Salary \$		Ending Salary \$	
From	To	Reason for Leaving			

EDUCATION

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

EMERGENCY CONTACTS (Please list three nearest relatives – 3 REQUIRED FOR SAFETY).

Name	Relation	Phone: ()
Name	Relation	Phone: ()
Name	Relation	Phone: ()

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application, interview, in any supplemental thereto, or in any company records, will be cause, at the company's sole option, for not employing me or for immediately discharging me without notice at any time during my employment.

Applicant's
Signature

(X)

Date

All statements made by applicants for employment on this application will be checked for accuracy. False or misleading information given may result in discharge. We offer E.E.O. to all persons without regard to race, color, religion, age, mental or veteran's status, sex, national origin, disability, or any other legally protected status.