

PLATTSBURGH, NY

POTSDAM, NY

APPLICATION FOR EMPLOYMENT

DATE _____

FIRST NAME _____ MIDDLE NAME _____ LAST NAME _____

SOCIAL SECURITY _____ - _____ - _____ TELEPHONE () _____ ARE YOU 18 OR OLDER? Y or N

PRESENT ADDRESS _____ HOW LONG? _____

LIST HANDICAPS, HEALTH PROBLEMS OR **PRIOR WORK INJURIES** THAT SHOULD BE CONSIDERED IN JOB PLACEMENT (IF NONE, PLEASE INDICATE)

_____ **MUST INITIAL** _____

DO YOU HAVE ANY OBJECTIONS TO A PRE-EMPLOYMENT PHYSICAL AND/OR X-RAYS? Y or N

HAVE YOU EVER BEEN CONVICTED OF A FELONY? Y or N IF YES, WHEN? _____ EXPLAIN _____

DATE AVAILABLE FOR WORK _____ NUMBER OF HOURS PER WEEK DESIRED _____

WORK SCHEDULE AVAILABLE: _____ FULL TIME _____ PART TIME

_____ DAYS _____ EVENINGS _____ SATURDAY _____ SUNDAY

TYPE OF WORK PREFERRED

POSITION DESIRED 1. _____ YEARS OF EXPERIENCE _____

2. _____

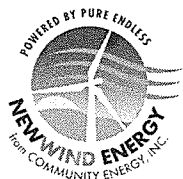
3. _____

CERTIFIED WELDER Y or N IF YES, TYPE OF CERTIFICATION _____

PLEASE NOTE ANY OTHER TRADE CERTIFICATIONS _____

CITIZENSHIP: IF REQUESTED, CAN PROOF OF CITIZENSHIP, VISA THAT PERMITS TYPE OF EMPLOYMENT SAUGHT OR ALIEN REGISTRATION BE PROVIDED? Y or N

WILL VISA OR IMMIGRATION STATUS PREVENT LAWFUL EMPLOYMENT? Y or N



EDUCATION:

SCHOOLS	NAME & ADDRESS OF SCHOOL	DATES ATTENDED		MAJOR STUDIES	LAST GRADE COMPLETED
		FROM	TO		
HIGH SCHOOL					
COLLEGE, TRADE OR BUSINESS SCHOOLS					

EMPLOYMENT EXPERIENCE:

GIVE EMPLOYMENT HISTORY AS COMPLETELY AS POSSIBLE STARTING WITH YOUR PRESENT OR MOST RECENT EMPLOYER.

EMPLOYER NAME	ADDRESS	PHONE	START DATE	END DATE

REFERENCES:

GIVE NAMES OF THREE PERSONAL REFERENCES (NON-RELATIVES) BY WHOM YOU HAVE NOT BEEN EMPLOYED. THESE PEOPLE SHOULD HAVE KNOWN YOU FOR SEVERAL YEARS.

NAME	ADDRESS	PHONE	OCCUPATION	YEARS KNOWN

I AUTHORIZED INVESTIGATION OF ALL STATEMENTS ON THIS APPLICATION. IT IS FURTHER UNDERSTOOD THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR HEREON WILL RESULT IN CANCELLATION OF THIS APPLICATION OR DISMISSAL FROM THE COMPANY'S SERVICE IF I HAVE BEEN EMPLOYED.

SIGNATURE

DATE