

| NAME | | | Tooling He | and and any connections. 1707m | ng onaton. | | SALARY REQU | JIREM | IENT | | | | |
|----------------------------------|---|--|------------|---------------------------------------|---------------|------------|-------------|-------|------|----|----------|-----|---|
| L | AST I | FIRST M | IDDLE | HAVE YOU E | VER APPLIED W | ITH US BEF | ORE? | | | YE | S | NO | |
| | | | | DO YOU HAVE STEEL TOES SHOES? | | | | | | YE | S | NO | |
| ADDRESS | | DO YOU HAVE TRANSPORTATION? | | | | | | YE | S | NO | | | |
| | | | | DO YOU HAVE A VALID DRIVER'S LICENSE? | | | | | | YE | S | NO | |
| CITY | S. | TATE | ZIP | _ | | | | | | | | | |
| | | | | DATE AVAILABLE TO START WORK: | | | | | | | | | |
| EMAIL ADDRESS | | _ | | | | | | | | | | | |
| ANY UNAVAILABLE DAY/ DATES: (CIF | | | | | | | LE) | S | М | тν | V TH | F | S |
| CONTACT PHONE # | | | | _ | | | | | | | | | |
| PERSON TO NOTIFY IN | I CASE OF AN EMERGENCY: | | | SHIFT AVAIL | ABLE | 1ST | 2ND | 3RD |) | | | | |
| NAME | PHONE | | | _ | | | | | | | | | |
| | | | | | | | | | | | | | |
| EDUCATION: HIGH | SCHOOL: | RECEIVED: DIPLOMA GED OR HIGHEST GRADE COMPLETED | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| POST- SECONDARY | EDUCATION | | | | | | | | | | | | |
| | NAME OF COLLEGE, UNIVERSITY, BUSINESS, TECHNICAL OR TRADE SCHOO | | | | OOL DEGREE | | | | | | | | |
| | | | | | | | | | | | | | |
| CERTIFICATIONS: | | | | | | | | | | | | | |
| SKILLS: | | _ | | | | | _ | | | | | | |
| SAP | | ENGINEERING | | | LUMBER S | TACKING | | IG | | |] CDL | | |
| EXCEL | ACCOUNTING | MAINTENANCE | | IG | ELECTRIC | AL | WAREHC | USE | | |] Forkli | IFT | |
| POWERPOINT | QUICKBOOKS | MACHINIST | DOWER | TOOLS | | RY | | ORY | | | | | |
| DATA BASE | SALES | PRODUCTION | GRINDI | NG | PAINTING | | SHIPPIN | G | | | | | |
| | | | | | | | | | | | | | |
| EMPLOYMENT RE | CORD (MOST RECENT F | IRST) | | | | | | | | | | | |

| EMPLOYER NAME AND ADDRESS | DATES OF EMPLOYMENT | FROM | то | | | |
|---------------------------|---------------------|------|--------|--|--|--|
| REASON FOR LEAVING | TYPE OF WORK | | SALARY | | | |
| EMPLOYER NAME AND ADDRESS | DATES OF EMPLOYMENT | FROM | то | | | |
| REASON FOR LEAVING | TYPE OF WORK | | SALARY | | | |
| EMPLOYER NAME AND ADDRESS | DATES OF EMPLOYMENT | FROM | то | | | |
| REASON FOR LEAVING | TYPE OF WORK | | SALARY | | | |

I CERTIFY THE INFORMATION SUBMITTED ON THIS APPLICATION IS ACCURATE. I HEREBY GRANT ALL SEASONS TEMPORARIES PERMISSION TO VERIFY MY EMPLOYMENT HISTORY AND CRIMINAL BACKGROUND. IT IS UNDERSTOOD THAT ANY FALSE STATEMENT IS SUFFICIENT FOR DISMISSAL.

SIGNATURE: