

# Clinco Industries, Inc.

## EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

Date: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Position(s) Desired: 1. \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ 2. \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (MI)

SS#: \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Length of time at address: \_\_\_\_\_

Previous: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Length of time at address: \_\_\_\_\_

May we contact you at work?  No  Yes, Work #: \_\_\_\_\_

How were you referred to us? \_\_\_\_\_ Name Of Referral Source: \_\_\_\_\_

Available to work:  Full Time  Part Time

Pay desired: \_\_\_\_\_ Minimum acceptable salary: \_\_\_\_\_

Can begin work on: \_\_\_\_\_ with the following scheduling limitations: \_\_\_\_\_

Have you ever been employed by Clinco Industries, Inc.?  No  Yes, When \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

Position(s) held? \_\_\_\_\_ Supervisor(s)? \_\_\_\_\_

Are you lawfully eligible to be employed in the United States:  No  Yes

Have you ever filed an application here before?  No  Yes, When \_\_\_\_\_

Do you have any relatives that work for Clinco Industries, Inc.?  No  Yes

| (Name) | (Position) | (Location) | (Relationship) |
|--------|------------|------------|----------------|
|        |            |            |                |

Have you ever been convicted of a felony/misdemeanor?  No  Yes

If yes, please give details indicating: dates, nature, and place of the offense and the current status. A conviction will not necessarily disqualify you from the job for which you are applying.

Have you ever been asked to resign or been terminated from any job?  No  Yes, if yes, please explain.

During the past year, were you ever subject to disciplinary action such as verbal or written warning(s), or suspension? If yes, please explain. \_\_\_\_\_

### EDUCATION:

High School:

Name and Location: \_\_\_\_\_

Name and Location: \_\_\_\_\_

**College:**

Name and Location: \_\_\_\_\_

Degree: \_\_\_\_\_

Graduated:  No  Yes

Name and Location: \_\_\_\_\_

Degree: \_\_\_\_\_

Graduated:  No  Yes

**OFFICE SKILLS:**

Typing/Keyboarding:  No  Yes, Words per minute: \_\_\_\_\_

Calculators:  No  Yes

Software: Please indicate any office software skill you have acquired through training and/or experience;

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OPERATING SYSTEMS:**

Please identify any computer operating systems you are familiar with or have used.

\_\_\_\_\_  
\_\_\_\_\_

Please tell us about any skills, training, experience, or other information we should know qualify you for the position(s) for which you are applying.

\_\_\_\_\_  
\_\_\_\_\_

**PREVIOUS EMPLOYMENT**

Name and Address of Current or Last Employer \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Starting and Ending Salary or Wage \_\_\_\_\_

Job Title \_\_\_\_\_

Description of Work \_\_\_\_\_

May We Contact this Employer? \_\_\_\_\_

If Yes, Who should we contact? \_\_\_\_\_

Name and Address of Prior Employer \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Starting and Ending Salary or Wage \_\_\_\_\_

Job Title \_\_\_\_\_

Description of Work \_\_\_\_\_

May We Contact this Employer? \_\_\_\_\_

If Yes, Who should we contact? \_\_\_\_\_

Name and Address of Prior Employer \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Starting and Ending Salary or Wage \_\_\_\_\_

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Job Title \_\_\_\_\_

Description of Work \_\_\_\_\_

May We Contact this Employer? \_\_\_\_\_

If Yes, Who should we contact? \_\_\_\_\_

Name and Address of Prior Employer \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Starting and Ending Salary or Wage \_\_\_\_\_

Job Title \_\_\_\_\_

Description of Work \_\_\_\_\_

May We Contact this Employer? \_\_\_\_\_

If Yes, Who should we contact? \_\_\_\_\_

## PERSONAL REFERENCES

Please provide us with the name, address and telephone number of three personal references (no relatives, please), how long you have known that person, and what your relationship with that person is.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

## AUTHORIZATION AND STATEMENT OF TRUTHFULNESS

"I certify that all of the information I have provided is true and complete. I understand that any false information, omissions, or misrepresentations may result in Clinco Industries, Inc. declining to employ me, or, if I am employed, my employment may be terminated. I agree that if I am employed, I will comply with Clinco Industries, Inc. employment policies and guidelines and that I understand that Clinco employees are employees "at will", which means that either I or the Clinco can terminate the employment relationship at any time, for any reason or no reason at all, with or without notice. I also understand that the conditions and terms of my employment can be changed by the Clinco at any time, with or without notice. I also understand that Clinco Industries, Inc. does not enter into employment contracts unless it is plainly captioned "Employment Agreement" and is signed by the Manager of Clinco Industries, Inc. and the employee. No other Clinco employee has the authority to verbally or in writing enter into any employment contract on behalf of Clinco Industries, Inc.."

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

