

EMPLOYMENT APPLICATION

		(PLEASE PRINT ALL INFOR	MATION EXCEPT SIGNATURE)					
equal employment to all status, or any other stat job offer is made. If a jo	qualified persons without discri us protected under state and fe	mination on the basis of sex deral law. It is also the polic ay be contingent upon the s	, race, color, religion, age, man y of the company to have the	employment. It is the policy of the company to provide ital status, national origin, citizenship, disability, veterar option of conducting pre-employment screening before a ical examination, which may include providing body				
Name:			Social Security #:					
Home Phone			Work Phone					
Please list below	your current address an	d one other most rece	ent addresses:					
Street	Street City State		Zip	Since (Mo/Yr)				
Street	City	State	Zip	Since (Mo/Yr)				
		EDUC	ATION					
High School Attende	ed C	ity, County & State		Did you earn a Diploma?				
		EMPLOYMENT	INFORMATION					
Position Applied Fo	r:	Date	You Can Start Work:	Desired Salary \$				
Do You Prefer: ☐ F	ull-Time 🗆 Part-Time							
(Race/Ethnicity - Fo	r EEO tracking only,not mai	ndatory)						
Please answer all explanations:	of the following question	ons. When necessary,	note question number a	and use an extra paper to provide				
Are you at least 18	years of age and legally eli	gible for work in the Uni	ted States? □YES □NO					
Will you work over	time when necessary?	YES □ NO						
Have you ever bee	n employed by us? ☐ YES	□ NO If yes,when						
Are you on layoff a	and subject to recall?	YES □ NO						
Have you ever been	n discharged or asked to res	sign from a job? (If yes,	please explain) □YES □I	NO				
Will you work out o	f state or out of the area, re	equiring overnight stay(s) if necessary? □YES □N	NO				
Are you willing and	able to read our company p	policies and abide by the	m if hired? □YES □NO					
				more in all kinds of weather, as well as typing, ccommodation?				

98 CR 321 Poplar Bluff, MO 63901 573-686-4142

Email: tpersons@personsandsoninc.com

Next Page on Back



	EMPLOYME	NI HISI	ORY						
	MAY WE CONTACT YOUR PRESENT								
Please list below your last three emplo	vore boginning wit	h the most :	EMPLOYER?		> L	□NO			
Most Recent Employer	Cit		State	Zip Co	de	Phone			
Position Held	Dates From/To		Pay Rate Upon		Supervisor				
		Le	aving \$						
Duties	Reason for I	_eaving							
Next Most Recent Employer	Cit	City State		Zip Co	Zip Code Phone				
Position Held	Dates From/To	Pay Rate Upon Leaving \$			Supervisor				
Duties	Reason for I	_eaving							
Next Most Recent Employer	Most Recent Employer City		State	Zip Co	de	Phone			
Position Held	Dates From/To		Pay Rate Upon Leaving \$		Supervisor				
Duties	Reason for I	_eaving							
	JOB-RELAT	ΓED SKII	LLS						
Please answer the following questions. provide explanations:	When necessary,	note questio	on number and	d use ext	ra pap	er to			
Do you have a valid driver's license?		□ YES □	NO						
2. Do you have a valid CDL?		□ YES □	NO						
(If Yes: Driver's License/CDL Number & Stat	e Issued by)		Da	te of Issu	e:				
3. Have you had your driver's license suspen	ided, revoked or you	r driving privile	eges modified b	y a court	of law	? □ YES □ NO			
If Yes, please explain:									
4. Any Experience in the Armed Forces? Plea (This information will not necessarily be a	•	rge info, and a	any information	that could	d be re	levant:			
APPLICA	NT'S CERTIF	ICATION	N AGREEN	1ENT					
I authorize the investigation of all statemer supplying such information, and I also releat understand that even if I am to receive an that my legal right to work in the US will be forth in this application are true and complemisrepresentation, or omission of facts on the employment or immediate termination of eli agree, if I am offered and accept a position understand that the Company reserves the ALSO UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT RELATIONSHIP AT ANY TIME	ase the company fron offer of employment, a verified before actual ete to the best of my this application (or or employment, regardles on, to conform to all a right to change wage EMPLOYMENT WILL E E AND FOR ANY OR	n all liability the Persons and all employmen knowledge. In any required as of when or existing and fues, hours and BE AT-WILL, MO REASON.	nat might result Son, Inc. partic t begins. I certic understand that documents) withow discovered uture Company working conditi IEANING THAT	from makipates in the fy that the tany falsiful be caused. It is and ons as deep the first prices or the form of the first prices and ons as deep the first prices or the first prices and ons as deep the first prices or the first prices and the first prices or the fi	ting the he EVE he facts fication for de regulatemed rARTY (e investigation. I RIFY program, and and information set an, enial of tions and I necessary. CAN END THE			
I understand that any employment offer is proof of identity and eligibility to work in or reviewed the information provided in this a certify that I understand all parts of it and	der to comply with the pplication and the ab	ne Immigration ove statement	ts. By signing th						