



All-Dry of Missouri

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE _____

NAME _____

SSN _____

ADDRESS _____

PHONE _____

CITY _____ STATE _____ ZIP _____ ARE YOU 18 YEARS OR OLDER? _____

MAILING ADDRESS IF DIFFERENT _____

DO YOU HAVE A VALID DRIVER'S LICENSE? _____ CLASS OF LICENSE YOU POSSESS _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____ (IF YES, PLEASE EXPLAIN ON BACK)

EMPLOYMENT DESIRED

DESIRED POSITION _____ START DATE _____

SALARY DESIRED _____ ARE YOU PRESENTLY EMPLOYED? _____

WHERE? _____ MAY WE INQUIRE OF YOUR EMPLOYER? _____

REFERRNCES (NAMES OF 3 PEOPLE NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST 1 YEAR)

NAME _____ PHONE _____ YRS. KNOWN _____

NAME _____ PHONE _____ YRS. KNOWN _____

NAME _____ PHONE _____ YRS. KNOWN _____

PHYSICAL RECORD

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? _____

IF YES WHAT CAN BE DONE TO ACCOMMODATE YOUR LIMITATIONS? _____

PLEASE DESCRIBES LIMITATIONS _____

IN CASE OF EMERGENCY NOTIFY: NAME _____ RELATION _____

ADDRESS _____ PHONE _____

EDUCATION

DO YOU HAVE ANY SPECIAL TRAINING OR EXPERIENCE THAT WOULD BE AN ASSET TO THE POSITION THAT YOU HAVE APPLIED FOR? _____

IF YES, PLEASE DESCRIBE _____

AS A CONDITION OF EMPLOYMENT WE REQUIRE THE RIGHT TO CHECK YOUR VEHICLE DRIVING AND CRIMINAL BACKGROUND INCLUDING MISDEMEANOR TRAFFIC TICKETS AND VIOLATIONS. WE ALSO RESERVE THE RIGHT TO CHECK THIS RECORD PERIODICALLY. I UNDERSTAND THIS REQUEST AND AGREE TO THIS REQUIREMENT.

SIGNED _____ DATE _____

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE."

SIGNATURE _____

DATE _____