

FORT DODGE TRANSMISSION JOB APPLICATION

PERSONAL INFORMATION

NAME: _____

PRESENT ADDRESS: _____

CITY, STATE, ZIP: _____

SOCIAL SECURITY #: _____ PHONE: _____

POSITION APPLYING FOR: _____

RATE OF PAY EXPECTED: _____ DATE AVAILABLE: _____

ARE THERE ANY EXPERIENCES, SKILLS OR QUALIFICATIONS WHICH YOU FEEL WOULD
FIT YOU FOR WORK WITH OUR ORGANIZATION?: _____

DO YOU HAVE A VALID DRIVERS LICENSE? YES NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

EMERGENCY CONTACT (OTHER THAN SPOUSE): _____

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES: YES NO

LAST YEAR OF SCHOOL COMPLETED: 8 9 10 11 12 COLLEGE: 1 2 3 4

HOW DID YOU HEAR ABOUT JOB? Check one Online Newspaper Radio Job Service Friend/_____

EMPLOYMENT HISTORY

LIST BELOW ALL PRESENT & PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT

1. NAME OF COMPANY: _____ LOCATION: _____
TELEPHONE: _____ CONTACT: _____
EMPLOYED (MONTH & YEAR) FROM: _____ TO: _____
REASON FOR LEAVING: _____
MAY WE CONTACT THIS EMPLOYER? YES NO
IF NO, WHY NOT? _____

2. NAME OF COMPANY: _____ LOCATION: _____
TELEPHONE: _____ CONTACT: _____
EMPLOYED (MONTH & YEAR) FROM: _____ TO: _____
REASON FOR LEAVING: _____
MAY WE CONTACT THIS EMPLOYER? YES NO
IF NO, WHY NOT? _____

3. NAME OF COMPANY: _____ LOCATION: _____
TELEPHONE: _____ CONTACT: _____
EMPLOYED (MONTH & YEAR) FROM: _____ TO: _____
REASON FOR LEAVING: _____
MAY WE CONTACT THIS EMPLOYER? YES NO
IF NO, WHY NOT? _____

PERSONAL REFERENCES

NAME AND OCCUPATION

_____ PHONE: _____

_____ PHONE: _____

_____ PHONE: _____

MILITARY SERVICE RECORD

WERE YOU IN THE U.S. ARMED FORCES: YES NO
IF YES, WHICH BRANCH? _____
DATES OF DUTY: FROM _____ TO _____

I HEREBY GIVE PERMISSION TO CONTACT THE EMPLOYERS AND PERSONAL REFERENCES LISTED ABOVE CONCERNING ANY INFORMATION YOU DEEM RELEVANT.

I DECLARE THE INFORMATION PROVIDED BY ME IN THIS APPLICATION IS TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF EMPLOYED, ANY FALSIFICATION, MISSTATEMENT, OR OMISSION OF FACT IN CONNECTION WITH MY APPLICATION, WHETHER ON THIS DOCUMENT OR NOT, MAY RESULT IN IMMEDIATE TERMINATION OF EMPLOYMENT. I AUTHORIZE YOU TO VERIFY ANY AND ALL INFORMATION PROVIDED ABOVE.

I ACKNOWLEDGE THAT IF I BECOME EMPLOYED, I WILL BE FREE TO TERMINATE MY EMPLOYMENT AT ANY TIME FOR ANY REASON, AND THAT FORT DODGE TRANSMISSION RETAINS THE SAME RIGHTS.

SIGNATURE: _____ DATE: _____

COMMENTS: _____

REFERENCE CHECK: _____

For Company Use Only

Terms Upon Hiring:
PT Status or
FT (pending probation of 30-120 days)
Wage \$ _____
Start Date _____