

APPLICATION FOR EMPLOYMENT

Taylor Iron-Machine Works, Inc
Po Box 188, Taylor TX 76574
Phone: 512-352-3646 Fax: 512-365-8845

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications. Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a résumé, but all questions must be answered.

PERSONAL INFORMATION

NAME

PRESENT ADDRESS

DATE OF BIRTH STREET CITY STATE ZIP
MARITAL STATUS DRIVERS LIC. NO.

PHONE NO.

EMAIL ADDRESS

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY
BECAUSE OF VISA OR IMMIGRATION STATUS?

YES NO

EMPLOYMENT DESIRED

MACHINING

WELDING

LANGUAGE SPOKEN OTHER THAN ENGLISH?

YES NO

Boring Mill Lathe

Stick MIG
TIG Oxy/Acetyl

Have you ever been convicted of a misdemeanor/felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No

DATE YOU CAN START



MINIMUM WAGE REQUIRED
(Must Be Filled Out)



EDUCATION

TYPE OF SCHOOL	NAME AND LOCATION OF SCHOOL	DID YOU GRADUATE?	SUBJECTS STUDIED

SPECIAL SKILLS

Please list any special skills or experience that you feel would help you in the position that you are applying for.

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	PHONE
1		
2		
3		

FORMER EMPLOYERS

Start with your present or most recent employment and work back. Use a separate sheet if necessary.

CO NAME:	PHONE NO.	START DATE
ADDRESS:		END DATE
POSITION / DUTIES:		SALARY
REASON FOR LEAVING		

CO NAME:	PHONE NO.	START DATE
ADDRESS:		END DATE
POSITION / DUTIES:		SALARY
REASON FOR LEAVING		

CO NAME:	PHONE NO.	START DATE
ADDRESS:		END DATE
POSITION / DUTIES:		SALARY
REASON FOR LEAVING		

CO NAME:	PHONE NO.	START DATE
ADDRESS:		END DATE
POSITION / DUTIES:		SALARY
REASON FOR LEAVING		

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.

I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party. All Persons hired by this company are on a 180 day trial period before permanent employment.

DATE

SIGNATURE

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY:

DATE

REMARKS:

WELDING OR MACHINING ABILITY:

APPLICANT HIRED: YES ___ NO ___

POSITION:

DATE STARTING

STARTING SALARY:

APPROVED INCREASE AFTER 90 DAYS: