



Box 47, Highway 8 North  
Douglassville, Texas 75560

Phone 903-846-2311  
Fax 903-846-2406

**PERSONAL DATA**

Position applied for: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

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

Cell Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Other Phone Number: \_\_\_\_\_

Date available for work? \_\_\_\_\_ Are you at least 18 yrs. old?  Yes  No

Will you work overtime?  Yes  No Will you work weekends?  Yes  No

Can you relocate if job requires it?  Yes  No Can you travel for work?  Yes  No

Check each type of work you will accept:  temporary  part-time  full-time

Have you ever filed an application here before?  Yes  No  Date: \_\_\_\_\_

Have you ever been employed here before?  Yes  No  Date: \_\_\_\_\_

Are you or your spouse related to any officer or employee of this employer?  Yes  No If yes, who? \_\_\_\_\_

What shift(s) are you available?  1st  2nd  Weekend

**EDUCATION AND TRAINING**

| Name of Schools Attended and Location (City / State) | Dates Attended From: To: | Grade Average | Major Field | Degree Received                                 |
|--|--------------------------|---------------|-------------|---|
| High School  |                          |               |             | Please circle<br>Diploma: yes/no<br>GED: yes/no |
| College/University                                   |                          |               |             |   |
| Business College                                     |                          |               |             |   |
| Technical Training                                   |                          |               |             |   |
| Other  |                          |               |             |   |

The following space is provided for other information concerning special training, interests, career goals, or any other data you wish to provide.

List each position held. Start with your current or most recent assignment and work backward. If you need additional space, please continue on separate sheet(s) of paper.

**THIS SECTION MUST BE COMPLETED IN FULL. PLEASE DO NOT INDICATE "SEE RESUME."**

Are you presently employed?  Yes  No May we contact present employer?  Yes  No

|                     |                       |           |         |
|---------------------|-----------------------|-----------|---------|
| Employer            | <b>Dates</b>          | From:     | To:     |
| Address             | <b>Salary</b>         | Starting: | Ending: |
| Job Title           | Summary of Job Duties |           |         |
| Supervisor          | Title                 |           |         |
| Telephone Number(s) |                       |           |         |
| Reason for leaving  |                       |           |         |

|                     |                       |           |         |
|---------------------|-----------------------|-----------|---------|
| Employer            | <b>Dates</b>          | From:     | To:     |
| Address             | <b>Salary</b>         | Starting: | Ending: |
| Job Title           | Summary of Job Duties |           |         |
| Supervisor          | Title                 |           |         |
| Telephone Number(s) |                       |           |         |
| Reason for leaving  |                       |           |         |

|                     |                       |           |         |
|---------------------|-----------------------|-----------|---------|
| Employer            | <b>Dates</b>          | From:     | To:     |
| Address             | <b>Salary</b>         | Starting: | Ending: |
| Job Title           | Summary of Job Duties |           |         |
| Supervisor          | Title                 |           |         |
| Telephone Number(s) |                       |           |         |
| Reason for leaving  |                       |           |         |

|                     |                       |           |         |
|---------------------|-----------------------|-----------|---------|
| Employer            | <b>Dates</b>          | From:     | To:     |
| Address             | <b>Salary</b>         | Starting: | Ending: |
| Job Title           | Summary of Job Duties |           |         |
| Supervisor          | Title                 |           |         |
| Telephone Number(s) |                       |           |         |
| Reason for leaving  |                       |           |         |

**PROFESSIONAL CERTIFICATIONS, LICENSES or MEMBERSHIP**

---

---

---

---

---

---

---

**ADDITIONAL INFORMATION**

You must be authorized to work in the United States in order to be employed by this employer. If you are one of the following, please check here:

- A citizen or a national of the United States
- An alien lawfully admitted for permanent residence
- An alien authorized by Immigration and Customs Enforcement to work in the United States

If the position for which you are applying requires the operation of a motor vehicle, do you have a current Texas Driver's License?  Yes  No If yes, provide: License No. \_\_\_\_\_

Type of license:  Operator  Commercial If yes,  Type A  Type B

If applicable to the position for which you are applying, what languages do you speak? \_\_\_\_\_  
Write/read? \_\_\_\_\_

**REFERENCES**

List three persons not related to you who can describe your qualifications for the position you seek.

| Name | Organization | Telephone No. | Occupation |
|------|--------------|---------------|------------|
|      |              |               |            |
|      |              |               |            |
|      |              |               |            |

## APPLICANT CERTIFICATION

I certify that the information provided in connection with my application for employment is true, correct and complete. I understand that any false statement or omission may disqualify me from consideration for employment, and, if I am employed, any misstatement or omission of fact may result in my dismissal.

I hereby release and authorize the company and its agent to verify, inspect, copy and obtain records pertaining to the information I have provided in this application. I hereby authorize any persons or concerns to furnish information in their possession concerning any of the information I have provided in this application and release such persons or concerns from any and all liability arising therefrom.

I understand and agree that:

- Business needs may at times make the following conditions mandatory: overtime, shift work, shift changes, rotating work schedule, or weekend work schedules. I accept these as conditions of continuing employment.
- If employed, I will agree not to divulge any confidential information I have gained and to protect the company's confidential information.
- This application for employment and any attachment(s) are the property of the company and will become part of my personnel file if I am hired.
- If employed by the company, I agree to abide by its rules and regulations. Further, I understand and agree that employment is at will and may be terminated at any time, with or without cause or reason and with or without notice. This application cannot be construed as a contract or as a guarantee of employment or continued employment and no agreement to the contrary will be effective.

As a condition of employment with the company, I understand I must pass a drug screen and have satisfactory results on a criminal background check.

I agree and acknowledge that the terms and conditions of employment cannot be changed except by a written document.

The company reserves the right to administer drug screening procedures for cause or upon reasonable suspicion. I consent to participation in any such program(s) and I understand and agree that the company may take disciplinary action up to and including termination of employment for failure to pass or refusal to take a drug screen.

I HAVE READ THE ABOVE PARAGRAPHS, UNDERSTAND THEIR IMPORTANCE AND EFFECT UPON MY EMPLOYMENT, AND ACCEPT THE SAME AS CONDITIONS OF MY EMPLOYMENT.

---

Signature of Applicant

Date



### NOTICE TO APPLICANTS

Screening test for illegal drug use may be required as a condition of employment.