

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	Dates	From:	To:
Address	Salary	Starting:	Ending:
Job Title	Summary of Job Duties		
Supervisor	Title		
Telephone Number(s)			
Reason for leaving			

Employer	Dates	From:	To:
Address	Salary	Starting:	Ending:
Job Title	Summary of Job Duties		
Supervisor	Title		
Telephone Number(s)			
Reason for leaving			

Employer	Dates	From:	To:
Address	Salary	Starting:	Ending:
Job Title	Summary of Job Duties		
Supervisor	Title		
Telephone Number(s)			
Reason for leaving			

Employer	Dates	From:	To:
Address	Salary	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.