

APPLICATION FOR EMPLOYMENT

Brimhall Industrial, Inc.
 PO Box 548
 Monte Vista, CO 81144
 719-852-5070

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For			Date		
How did you learn about us?					
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Friend		<input type="checkbox"/> Walk-in	
<input type="checkbox"/> Employment Agency		<input type="checkbox"/> Relative		<input type="checkbox"/> Other _____	
Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip
Telephone Number(s)				Social Security Number	
				/ /	

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? If yes, give date _____ Yes No

Have you ever been employed with us before? If yes, give date _____ Yes No

Are you currently employed? Yes No

May we contact your current employer? Yes No

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? Yes No

Proof of immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work Full time Part time Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Can you work overtime if a job requires it? Yes No

Can you travel if a job requires it? Yes No

Have you ever been convicted of a felony? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

THIS IS AN EQUAL OPPORTUNITY EMPLOYER AND A DRUG-FREE WORKPLACE

Employment Experience

Start with your current or last job and include all employment experience. If additional space is needed, please attach a separate sheet of paper. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Dates From -- To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	
Job Title Supervisor		
Reason for Leaving		
Employer	Dates From -- To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	
Job Title Supervisor		
Reason for Leaving		
Employer	Dates From -- To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	
Job Title Supervisor		
Reason for Leaving		

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

US Military Service Branch _____ Dates: _____ War/Campaign/Expedition _____

Education

	Elementary	High School	Undergraduate College/University	Graduate/ Professional
School Name and Location				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma / Degree				
Describe Course of Study				
Describe any specialized training, apprenticeships, skills and extra-curricular activities				
Describe any honors you have received				
State any additional information you feel may be helpful to us in considering your application				

Indicate any foreign languages you speak, read and write, and level of proficiency:

Language: _____ Level(s) of Proficiency _____

List professional, trade, business or civic activities and offices held:

(You may exclude memberships which would reveal race, religion, national origin, age, ancestry, or handicap or other protected status.)

References

Give name, address, and telephone number of three references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

Are you physically or otherwise unable to perform any of the duties of the job for which you are applying? Yes No

Applicant's Statement:

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary, including checking with schools, employers, personal references, criminal record and driving record checks, in arriving at an employment decision.

I hereby understand and acknowledge that any relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the Company.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant: _____ Date: _____

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Employed Yes No Date of Employment _____ Pay Rate \$ _____ Per _____

By: _____ Title _____ Date _____

NOTES: _____

