



Application for Employment

General

Name _____

Address _____

*If at the above residence less than three years list below all residences for the past three years. Attach a separate sheet if necessary.

Street _____ City _____ State _____ Zip Code _____

Street _____ City _____ State _____ Zip Code _____

Telephone _____ Social Security # _____

Date Available for Employment _____ Desired Salary _____

Have you ever been employed by this company ? Yes ? No

Are you employed now? ? Yes ? No

May we contact your present employer? ? Yes ? No

If yes, give name: _____

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

Type of work desired: _____

If applying for a position where driving is required, do you have a valid driver's license in this state? ? Yes ? No

License # _____

Can you perform the essential functions of the job(s) for which you are applying? ? Yes ? No

Are you available to work ? Full-Time ? Part-Time ? Over-Time

Have you been convicted of a felony? ? Yes ? No

(Please note that a "Yes" answer will not bar you from consideration for employment.)

If yes, please explain: _____

Recruiting Source _____

This company is an equal employment opportunity employer. All applicants will be considered without regard to age, race, national origin, religion, disability, sex, or other protected status in accordance with applicable federal and state equal employment opportunity laws. This company will strive to accommodate any physical or mental limitations of employees or applicants in order to accomplish the essential functions of the job.



Education

Secondary

College

School Name and Address _____

Years completed

9 10 11 12

1 2 3 4

Course of Study _____

Employment Experience:

List your employers for the past 5 years, starting with the most recent, including unemployment periods and military experience. CDL driver applicants must provide 10 years employment experience.

Employer _____ **Supervisor's Name** _____

Address _____ **Your Job Position** _____

Telephone Number _____ **Employed from** _____ (mo/yr) to _____ (mo/yr)

Your Salary: Starting _____ **Ending** _____ **Duties** _____

What did you like most about your job? _____

Reason for Leaving _____

Employer _____ **Supervisor's Name** _____

Address _____ **Your Job Position** _____

Telephone Number _____ **Employed from** _____ (mo/yr) to _____ (mo/yr)

Your Salary: Starting _____ **Ending** _____ **Duties** _____

What did you like most about your job? _____

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Employer _____ Supervisor's Name _____

Address _____ Your Job Position _____

Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)

Your Salary: Starting _____ Ending _____ Duties _____

What did you like most about your job? _____

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Employer _____ Supervisor's Name _____

Address _____ Your Job Position _____

Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)

Your Salary: Starting _____ Ending _____ Duties _____

What did you like most about your job? _____

Reason for Leaving _____

Special Skills, Qualifications and Considerations:

Include any additional skills such as: Computer Competencies, Word Processing, Auto Cad, Typing (Words per minute) or any other skills pertaining to job applying for.



Other Experience:

In completing the following, please exclude organizations of religious, racial, ethnic, or other organizations at your option.

What positions of leadership or responsibility have you held in school, work or elsewhere?

Of what job-related organizations are you a member?

Military Experience:

Please include branch of service, occupational specialization, dates of service, grade/rank at discharge, and any special/technical training. Do not include R.O.T.C.

References:

List three (3) non-relatives who are familiar with your qualifications, work history, and ability.

Name	Occupation/Relationship	Years Known	Telephone
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Quiz: Please answer the following questions to the best of your ability.

120"

48"



**(1) This represents a 4 foot by 10 foot sheet of steel.
If I sent you out to the shop to cut me 36 pcs
40"x16"**

A. How many sheets would be required? _____

**B. Diagram on the picture, how you would cut
this piece of steel to minimize waste.**

**(2) Using a tape measure or ruler accurately measure the line above. _____ Inches
(Ask to borrow one if necessary)**



Please read the following statements carefully before signing this application. Only those applications that are signed and dated are considered valid. If you have any questions regarding this statement, please ask them before signing.

I certify that all answers and statements I have made on this application (and resume' or other supplementary materials are true and complete without omissions. By signing below, I authorize MSM Sheet Metal & Steel Fabrication Inc. to investigate all statements contained in this employment application as they may deem necessary in arriving at an employment decision. I understand that any false information provided by me will likely result in a refusal to hire or immediate discharge if I am employed. I authorize any of the persons or organization named in this application to give you complete information and records regarding my employment, education, character and qualifications.

If hired I will be responsible for familiarizing myself with all rules and regulations of MSM Sheet Metal & Steel Fabrication Inc. as they presently exist or are later modified. *If hired, I understand my employment can be terminated, at the discretion of MSM Sheet Metal & Steel Fabrication Inc. or at my option, without notice, at any time and for any reason.*

I also understand that no representative of MSM Sheet Metal & Steel Fabrication Inc. has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current written agreement signed by the president of MSM Sheet Metal & Steel Fabrication Inc.

I understand this application is not an offer of employment and no promises or representations of employment have been made to me at this time.

Driver Applicant Only

I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigating my safety performance history as required by 49CFR 391.23(d) and (e). I understand that I have the right to:

- Review information provided by previous employers;
- Have errors in the information corrected by previous employers and those previous employers to re-send the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

Signature _____ Date _____

I have read, understand, and agree with the above.

Signature of Applicant _____ Date _____

This application is valid for only (90) days from the date I signed. If I want to be considered for job openings more than ninety (90) days from date signed, I will submit a new application.

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