



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

				Date _____
Name _____				
Last	First	Middle	Maiden	
Present address _____				
Number	Street	City	State	Zip
How long have you lived at present address? _____				
Telephone: _____			Are you over the age of 18? _____	
E-mail: _____				

EMPLOYMENT DESIRED

Position(s) applied for _____	Days/hours available to work: _____
Salary desired _____	
How many hours can you work weekly? _____	Can you work evenings? _____
Employment desired <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME	
When are you available to start work? _____	
Have you worked here previously? Circle: YES NO If yes, when? _____	

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Business or Trade School				
Professional or Graduate School				

WORK EXPERIENCE

Please list your work experience beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer Address City, State, Zip Phone number	Name of last supervisor	Employment dates
		From To
	Your last job title	
Reason for leaving (<i>be specific</i>):		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		

Name of Employer Address City, State, Zip Phone number	Name of last supervisor	Employment dates
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Name of Employer Address City, State, Zip Phone number	Name of last supervisor	Employment dates
		From To

Your last job title
Reason for leaving (be specific):
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Have you ever been arrested for or convicted of a crime that has not been expunged by a court?

Yes No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

If hired, can you provide proof of U.S. citizenship or proof of your legal right to live and work in this country? Yes No

Have you ever been employed with this company? Yes No
If yes, when? _____

Do you have any friends or relatives employed by this company? Yes No
If yes, please provide their names and relationship to you.

If hired, would you have a reliable means of transportation to and from work? Yes No

Are you able to perform the essential functions and duties of the job for which you are applying? Yes No

If not, please describe the functions or duties you are unable to perform. _____

REFERENCES

Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years.

Name	Occupation
Company name	Address
Telephone	E-mail
	Years acquainted

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

APPLICATION FORM WAIVER

Please read each paragraph closely, initial each, and sign below

	I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any other document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
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	I hereby authorize PDQ Workholding, LLC and Impact CNC to thoroughly investigate my references, work records, education, driving record, credit history, criminal background and other matters related to my suitability for employment. I further authorize the employers, schools and other references I have listed to disclose to PDQ Workholding, LLC and Impact CNC any and all documents, transcripts, letters, reports and other information related to these references, without giving me prior notice of such disclosure. I hereby release PDQ Workholding, LLC and Impact CNC, my former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosures.
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	I understand that nothing contained in the application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between me and PDQ Workholding, LLC and Impact CNC, other than one that is "at will." I understand and agree that if I am employed, my employment will be of an "at will" nature, whereby either the employee or the employer may terminate the employment relationship at any time, with or without cause or notice. I further understand that my employment, if hired, is for no definite or determinable period of time and may be terminated at any time, at the option of either myself or PDQ Workholding, LLC and Impact CNC, and that no promise or representation contrary to the foregoing is binding on the company unless made in writing and signed by me and the company's designated representative.
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Signature of applicant: _____ Date: _____

PDQ Workholding, LLC and Impact CNC are an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, or disability. We assure you that your opportunity for employment with PDQ Workholding, LLC and Impact CNC depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.