

George E. Jones & Sons, Inc.
Application for Employment
(Please Print Clearly)

Full Name	Date
Street Address	Phone # / Email Address
City, State, Zip	Social Security Number
Position Applying For	Desired pay rate
Are you over the age of 18?	Yes _____ No _____
Do you have a valid drivers license?	Yes _____ No _____
Were you previously employed by us?	Yes _____ No _____
Are you legally eligible for employment in the U.S.A.? (Proof Required)	Yes _____ No _____

Work Experience:	
List the last three companies for whom you have worked. Start with the most recent.	
Company Name	From: _____ To: _____ Employment Dates
Address	Duties / Work Performed
Job Title	Ending Salary
Reason for Leaving	Name of Supervisor _____ May We Contact? _____
Company Name	From: _____ To: _____ Employment Dates
Address	Duties / Work Performed
Job Title	Ending Salary
Reason for Leaving	Name of Supervisor _____ May We Contact? _____
Company Name	From: _____ To: _____ Employment Dates
Address	Duties / Work Performed
Job Title	Ending Salary
Reason for Leaving	Name of Supervisor _____ May We Contact? _____

Personal References (No Former Employers or Relatives):		
Name	Address	Telephone Number

Education:				
School	Name & Location of School	Course of Study	No. of Years Completed?	Did You Graduate?
High School				
Trade / Technical				
College				
Other				

Do you have any special training or skills (CDL license, machine operation, etc.) you would like us to consider?

I, the undersigned, certify that the above statements are true and to the best of my knowledge. I understand that intentional falsification may result in my dismissal if I am hired. I understand that George E. Jones & Sons, Inc. may investigate my background and consult with my previous employer in conjunction with this application to determine suitability for employment. I hereby authorize my former employer to release pertinent information concerning me to George E. Jones & Sons, Inc.

I understand that George E. Jones & Sons, Inc. has an Alcohol and Substance Abuse Policy and that policy required pre-employment drug testing. I am aware that a complete copy of the policy is available to me at my request, and I will abide by all rules and guidelines of such policy.

I agree that, if hired, I will abide by all employee and safety rules and understand that failure to do so may result in dismissal.

Signature of Applicant _____ Date _____

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

EEOC Questionnaire

The following statistical information is required for compliance with federal laws assuring equal employment opportunity. Your submission of the information is voluntary. The information you provide on this form will not be used to determine your eligibility or qualification for employment. It will remain in a confidential file separate from your employment application.

Please select one EEO Code only:

_____ **Hispanic or Latino**

A person of Cuban, Mexican, Puerto Rican, South our Central American, o other Spanish culture or origin regardless of race.

_____ **White**

A person having origins in any of the peoples of Europe, the Middle East, or North Africa.

_____ **Black or African American (Not Hispanic or Latino)**

A person having origins in any of the black racial groups of Africa.

_____ **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)**

A person having origins in any of the peoples of Hawaii, Guan, Samoa,

_____ **Asian (Not Hispanic or Latino)**

A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

_____ **Two or More Races (Not Hispanic or Latino)**

All persons who identify with more than one of the above five races.

Signature: _____

Printed Name: _____

Date: _____