

EMPLOYMENT APPLICATION

Position applying for:

Please complete this application electronically or clearly printing. Fully and accurately complete all application questions, even if submitting your resume. Use additional sheets provided if more space is required.					
Name (Last)	(First)		(M.I.)		
Address (Street)	(City)	(Sta	te)	(Zip)
	((014	,	(2.6)
Cell Phone:	Email addres	SS:			
Home Phone:	🗌 Yes, plea	ase sign me u	p to receive job	updates via	email.
How did you hear about this opening	? Friend Fac	cebook 🗆 W	ord of Mouth	Other	
Have you ever worked for Industrial	Resources?	Yes	🗌 No		
Do you have friends or relatives emp	loyed by Industrial Re	sources?	🗌 Yes	🗌 No	
If yes, please state name(s) and relationship:					
Do you have the legal right to work in	ו the U.S.?	🗌 Yes	🗌 No		
Note: All employment offers are contingent upon proof of eligibility to work in the U.S.					
Are you available to work:	III-time 🗌 Par	t-time [Temporary		
Please list the hours and days of the week you are available?					
Are you willing to travel?	S NO				
Have you ever been dismissed, discharged, fired or asked to resign from a position? Yes No					
lf yes, please explain:					

Education			
Type of School	School & Location	Circle Yrs Completed	Degree/Certificate (Year higher level degree earned for verification purposes)
High School		9 th 10 th 11 th 12 th GED	
College or University Studies		1234	
Graduate School		1234	
Business or Tech. School		1234	
Other Relevant Training or courses			

License/Registration/Certificate (including driver's license)			
Description	State	Number	Expiration

Work History

Begin with your most recent experience. List all jobs separately (including military) and identify gaps in employment. **A résumé will not substitute for the information required in this section.** Résumés may be attached, but do not write "See Résumé" in lieu of completing the application.

If employment was under different na	me, indicate name:	
FROM: / /	TITLE:	CURRENT OR MOST RECENT EMPLOYER:
TO: / /	PRIMARY DUTIES:	
HOURS / WEEK:		
PAY RATE STARTING: ENDING:		ADDRESS:
SUPERVISOR:		
REASON FOR LEAVING:		
MAY WE CONTACT THIS EMPLOYER?		SUPERVISOR'S PHONE #:

FROM: / /	TITLE:	EMPLOYER:
TO: / /	PRIMARY DUTIES:	
HOURS / WEEK:		
PAY RATE STARTING: ENDING:		ADDRESS:
SUPERVISOR:		
REASON FOR LEAVING:		
MAY WE CONTACT THIS EMPLOYER?		SUPERVISOR'S PHONE #:
Yes No		

FROM: / /	TITLE:	EMPLOYER:
TO: / /	PRIMARY DUTIES:	
HOURS / WEEK:	-	
PAY RATE STARTING: ENDING:		ADDRESS:
SUPERVISOR:		
REASON FOR LEAVING:		
MAY WE CONTACT THIS EMPLOYER?		SUPERVISOR'S PHONE #:

Please indicate skills an	d aptitude belo	w:	Certifications: (For example: WABO)
Years	_Months	FCAW	
Years	_Months	GSAW	
Years	_Months	GTAW	
Years	_Months	Pipe Fitting	
Years	_Months	Pipe Welding	
Years	_Months	Structural Fitting	

ADDITIONAL EXPERIENCE (volunteer, internship, hobbies etc.):

Notice to Applicants

Drug testing is a prerequisite for, and a condition of employment. Our company conducts pre-employment and reasonable suspicion drug and alcohol testing.

Application Release

- To the best of my knowledge, the information herein is true and complete. I understand that providing false information on my application or during the hiring process will be grounds for elimination from further consideration or, if employed, for dismissal at any time.
- I understand that I will be required to provide documentation showing authorization to work in the United States.
- I understand that employees are considered at-will, meaning the employee or the company is free to terminate the employment relationship at any time, with or without reason, advance notice, or warning.
- I hereby authorize the company or its agents to solicit information regarding my previous employment, educational background and any other similar background information regarding my character, general reputation and credit, and to contact any previous employers and references I have given on my employment application regarding this information. I authorize all previous employers to furnish the company or its agents with any and all such information as described above that they may have regarding my employment and reason for leaving. I release all parties and persons connected with any such request for information or the furnishing of such information from all claims, liabilities and damages for any reason arising out of the request. If employed, I release the company from any liability for future references the company may provide regarding my work history.

DATE:	

SIGNATURE:_____