



# Sub-Contracter Job Application

We are an Equal Opportunity Employer and is committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## Personal Information

Name \_\_\_\_\_

Address _____		City _____	State _____	Zip _____
Phone Number _____	Mobile Number _____	Email Address _____		
Are You A U.S. Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>		Have You Ever Been Convicted Of A Felony? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test? Yes <input type="checkbox"/> No <input type="checkbox"/>				

## Position

Position You Are Applying For _____	Available Start Date _____	Desired Pay _____
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Employment Desired

Full Time       Part Time       Seasonal/Temporary

## Shift Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							
Overnight							

## Education

School Name	Location	Years Attended	Degree Received	Major

## References

Name	Title	Company	Phone

## Employment History

<b>Employer (1)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (2)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (3)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (4)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (5)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip

## Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge. I understand this is for sub-contract work. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I understand I am responsible to file my own taxes and job comes with no benefits package.

Name (Please Print)	Signature
Date	