



# Application for Employment

\*Items in red are required items.

*A&A Transfer, Inc. is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap or veteran status.*

Personal:

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number & Street City State Zip Code

Position Sought \_\_\_\_\_

Date Available \_\_\_\_\_ Salary Desired \_\_\_\_\_ Phone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_ Are you over 18 years old?

Are you legally eligible for employment in the Unites States?

(If offered employment, you will be required to provide documentation to verify eligibility. Failure to submit proof within required time may result in immediate termination of employment.)

Education: Please indicate education or training which you believe qualifies you for the position you are seeking.

High School: No. of Yrs Completed \_\_\_\_\_ Diploma: \_\_\_\_\_ G.E.D.: \_\_\_\_\_  
School(s) \_\_\_\_\_ City/State \_\_\_\_\_

College and/or Vocational School: Number of years Completed \_\_\_\_\_  
School(s) \_\_\_\_\_ City/State \_\_\_\_\_  
Major \_\_\_\_\_ Degrees Earned \_\_\_\_\_

Other Training or Degrees:  
School(s) \_\_\_\_\_ City/State \_\_\_\_\_  
Course \_\_\_\_\_ Degree or Certificate Earned \_\_\_\_\_

Professional License or Membership:

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Type of License(s) Held \_\_\_\_\_

License Expiration Date \_\_\_\_\_ Other Professional Memberships \_\_\_\_\_

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

Office Skills: MS Office ..... Adob CS: ..... # ) j "

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This application for employment is good for 30 days only.  
Consideration for employment after 30 days requires a new application.



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Have you ever been employed in any facility of the Company:

If so, please state facility name and location and dates of employment \_\_\_\_\_

Are you currently bound by a non-compete agreement from another company?

If yes, please explain: \_\_\_\_\_

Record of Conviction:

During the last ten years, have you ever been convicted of a crime, including minor traffic offenses?

If yes, explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*IMPORTANT: Not disclosing all convictions will result in automatic disqualification from employment with A&A Transfer, Inc. (A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.)*

Employment: List last employer first, including U.S. Military Service.

May we contact your present employer?

If any employment was under a different name, indicate name \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Position \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Salary \_\_\_\_\_ Supervisor \_\_\_\_\_ Department \_\_\_\_\_

Duties \_\_\_\_\_ FT \_\_\_\_\_ PT \_\_\_\_\_ No. of Hrs. \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Position \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Salary \_\_\_\_\_ Supervisor \_\_\_\_\_ Department \_\_\_\_\_

Duties \_\_\_\_\_ FT \_\_\_\_\_ PT \_\_\_\_\_ No. of Hrs. \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Position \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Salary \_\_\_\_\_ Supervisor \_\_\_\_\_ Department \_\_\_\_\_

Duties \_\_\_\_\_ FT \_\_\_\_\_ PT \_\_\_\_\_ No. of Hrs. \_\_\_\_\_



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Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Position \_\_\_\_\_ Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Salary \_\_\_\_\_ Supervisor \_\_\_\_\_ Department \_\_\_\_\_

Duties \_\_\_\_\_ FT \_\_\_\_\_ PT \_\_\_\_\_ No. of Hrs. \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

*If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.*

Explain any gaps in work history: \_\_\_\_\_

Have you ever been discharged or asked to resign from a job?

If yes, explain: \_\_\_\_\_

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## REFERENCES

### Professional

Name .... \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone .. \_\_\_\_\_

Name .... \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone .... \_\_\_\_\_

### Personal

Name .... \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone . \_\_\_\_\_

Name .. \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone . \_\_\_\_\_

