



Desired Position: _____

Date of Application: _____

EMPLOYMENT APPLICATION

Will Accept: Full-time Part-time Temporary Days Nights Weekend

APPLICANT INFORMATION

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () _____ Desired Wage: \$ _____

Email Address: _____

Emergency contact: _____ Emergency contact phone #: _____

Are you 18 years of age? YES NO If no, when will you be 18 years of age? _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

How did you hear about us?

Job Fair Indeed Company Web Site College Recruitment Agency Newspaper Ad

Referral – If so, who? _____

EDUCATION

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO

GED: _____ Date Earned: _____ From: _____ To: _____

College: _____ Address: _____

Did you graduate? YES NO Degree: _____ From: _____ To: _____

PREVIOUS/CURRENT EMPLOYMENT – Provide 10 years of employment – Use additional paper if needed – Complete all Sections, See resume is not accepted.

Company: _____

Phone: () _____ Fax: () _____ Email: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

PREVIOUS EMPLOYMENT - Provide 10 years of employment - Use additional paper if needed - Complete all Sections, See resume is not accepted.

Company: _____
Phone: () _____ Fax: () _____ Email: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____
Phone: () _____ Fax: () _____ Email: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

SPECIAL SKILLS/ CERTIFICATIONS, LICENSES

PROFESSIONAL REFERENCE

Please list a professional reference:

Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____

I understand that Universal Aerospace Co. Inc. does not unlawfully discriminate in employment/hiring process.

I understand that all job offers are contingent upon the results of a drug test, criminal background check, and verification of ability to work in the US.

I certify that my answers are true and complete. I understand that any information that is to be false will be sufficient cause to cancel further consideration of this application. I understand that by signing this, I am providing authorization to verify the information provided on this application including contacting previous employers.

Signature: _____ Date: _____