

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Completely fill out this application. Incomplete applications may not receive consideration.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Please read the following statements

1. I understand and agree that any misrepresentation by me in this application will be sufficient and just cause for my termination if I become employed.
2. If hired, Franklin Fixtures reserves the right to terminate my employment at any time, with or without cause and without prior notice other than is required by law.
3. I give Franklin Fixtures and it's agents the right to investigate all references and to secure additional information about me if job related. I hereby release Franklin Fixtures and it's agents from liability for seeking such information and all other persons, corporations or organizations for furnishing such information.
4. Franklin Fixtures is a weapon, drug & tobacco free facility. Use of tobacco is only permitted in designated areas and only during morning break, lunch break & afternoon break. Franklin Fixtures reserves the right to perform random drug testing with or without cause. Possession of weapons or illegal drugs on company property are grounds for immediate dismissal.
5. Franklin Fixtures is committed to equal opportunity employment and does not discriminate in hiring other than to select the most qualified and responsible people it can that it feels will contribute to our success. No question on this application is used for the purpose of limiting or excluding any applicants consideration for employment on a basis prohibited by local, state or federal laws.
6. I certify that I am either a citizen or national of the United States, an alien lawfully admitted for permanent residence, or an alien authorized by the Immigration & Naturalization Service to work in the United States.

Applicants Signature: _____

EMPLOYMENT DESIRED

Position: _____ or type of work you are applying for: Factory Office

Are you currently employed? No Yes If yes, may we contact your employer? No Yes

Date you can begin: _____ Range of pay you require (weekly or hourly) _____

RELIABILITY

Factory hours are 6:30 am to 5:00 pm Monday to Thursday. Office hours are 8:00 am to 5:00 pm Monday to Friday.

Will you be able to get to work on time? No Yes Will you be able to work a full day? No Yes

Do you have a reliable means of getting to work? No Yes Will you be able to work a full week? No Yes

If you drive to work, do you have a legally valid drivers license? Not driving No Yes

If hired, are there any circumstances which will affect your ability to reliably work the stated hours? No Yes

If Yes, please explain: _____

Will you be able to call if you will be late or absent from work? No Yes

EDUCATION*Please provide us with information on your education*

	Name & Location	Primary Study	Degree?
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade School			<input type="checkbox"/> Yes <input type="checkbox"/> No
College			<input type="checkbox"/> Yes <input type="checkbox"/> No
Military Education			<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Education			<input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT HISTORY*Please list from most recent employer first*

Name & Location of Company	Supervisor's Name	Dates Employed
	Payrate:	From: _____ To: _____
Position	Reason for leaving:	
Name & Location of Company	Supervisor's Name	Dates Employed
	Payrate:	From: _____ To: _____
Position	Reason for leaving:	
Name & Location of Company	Supervisor's Name	Dates Employed
	Payrate:	From: _____ To: _____
Position	Reason for leaving:	
Name & Location of Company	Supervisor's Name	Dates Employed
	Payrate:	From: _____ To: _____
Position	Reason for leaving:	

REFERENCES*Please list three references not related to you*

Name	Town & State	Phone Number	Years Known