

Employment Application

AASI

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.	Date of Review (Month/Day/Year) / /
APPLICANT DATA:	Position Applied for:
How were you referred to us:	

Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: () _____ Mobile/Pager/Other: _____ E-mail: _____

Date Available to Start: _____ Social Security #: - - Salary Requirement: _____

If you are under 18 and we require a work permit, can you furnish one? Yes No

If no, please explain: _____

Have you ever worked for this company? Yes No If yes when: _____

Are you a citizen of the United States? Yes No

If not, are you legally allowed to work in the United States? Yes No

Type of employment desired: Full Part-Time Temporary Seasonal

Have you ever pleaded "guilty," "no contest," or been convicted of a crime? Yes No

If yes, give dates and details: _____

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number if applicable to position: _____ State: _____

SUMMERIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS:

PREVIOUS EMPLOYMENT (begin with most recent position):

Dates of Employment: From: / / To: / / Position(s) Held: _____

Firm: _____ Address: _____

Phone: () Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference: Yes NO

Dates of Employment: From: / / To: / / Position(s) Held: _____

Firm: _____ Address: _____

Phone:() Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference: Yes NO

Dates of Employment: From: / / To: / / Position(s) Held: _____

Firm: _____ Address: _____

Phone:() Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

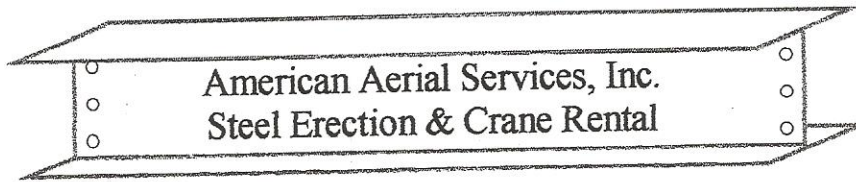
Reason for Leaving: _____

May we contact this employer for a reference: Yes NO

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.
Signing below also allows us to run a background check.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.
Employment is subjected to pre-employment physical and/or drug test results.

Signature of Applicant: _____ Date: _____



Please complete the following survey:

Iron Worker (# of years of experience)

Connector:

Detail Work:

Welder:

Rigger:

Other:

Welder (Please list any types i.e. stick, mig, tig, etc. as well as any certifications you have along with experience.)

Have you ever worked on structural steel before? Y / N

Crane Operator Years Experienced As: _____

List Cranes Models Operated (include hydraulic or conventional):

Do you have a Commercial Drivers License? Y / N

If yes list which states: _____

All Applicants Do you hold a valid driver's license? Y / N