



# APPLICATION FOR EMPLOYMENT

5133 Northeast Parkway  
Fort Worth, TX 76106  
Phone: (817)624-4001  
Fax: (817)624-4282

Start Date:  
Employee #:  
Dept #:  
Salary: \$

## APPLICANT INFORMATION

Today's Date:		Social Security No:	
Last Name:		First:	Middle:
Present Address:			
City:		State:	Zip Code:
Daytime Phone:		Evening Phone:	

## EMPLOYMENT DESIRED

Position you are applying for:

Summarize special skills and qualifications:

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## GENERAL

Date you can start:	Referred by:		
Salary desired:	Have you ever applied to this company before?		
Citizen of the USA?    Yes                      No	Where?	When?	
Contact in case of emergency:	Relation:	Phone:	
Have you ever been convicted of a felony other than minor traffic violations?    No                      Yes, Explain:			

## JOB HISTORY INFORMATION LIST EMPLOYERS BEGINNING WITH MOST RECENT

Employer:	Supervisor:	Position:	
Address:		Phone:	
Reason for leaving:	Salary:	From:	To:
Employer:	Supervisor:	Position:	
Address:		Phone:	
Reason for leaving:	Salary:	From:	To:
Employer:	Supervisor:	Position:	
Address:		Phone:	
Reason for leaving:	Salary:	From:	To:

Comments:

## Drug and Alcohol Abatement Program

Have you ever tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which the employee applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years?    **YES**                      **NO**

**Co-Operative Industries Aerospace & Defense is a Drug and Alcohol Free Workplace. All perspective employees will be required to submit to a pre-employment drug screening for the following drugs; cocaine, marijuana, opiates, PCP and amphetamines.**

## Background and Financial Investigation

All perspective employees will have their background and financial records checked prior to being accepted for employment with Co-Operative Industries Aerospace & Defense.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## EDUCATION

EDUCATION	NAME LOCATION OF SCHOOL	SUBJECTS STUDIED
Grammar School		
High School		
College		
Trade, Business or Correspondence School		
Subjects of special study or research works:		
U.S. Military or Naval Service:	Rank:	Present Membership in National Guard or Reserves:
Are you over the age of 18? Yes No		

## REFERENCES

GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of date of payment of my wages and salary, be terminated at any time without previous notice.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

### DO NOT WRITE BELOW THIS LINE

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

**REMARKS:** \_\_\_\_\_

Neatness:		Character:	
Personality:		Ability:	
Hired:	For Dept:	Starting Salary:	Approved by: