

Select Aerospace Industries, Inc.



P.O. Box 219 | Weyers Cave, Va 24486

Application for Employment



Application for Employment

Please read carefully and complete by printing in ink or typing

Name: (First, Middle Initial, Last)				Type(s) of work desired:		Date of Application:		
Street Address:						Social Security Number:		
City State Zip:				Phone: (Home)		Phone: (Work)		
How were you referred to us? (Check one)	<input type="checkbox"/> A. By your college	<input type="checkbox"/> B. Advertisement	<input type="checkbox"/> C. Employment Agency	<input type="checkbox"/> D. By an Employee	If (D), give name:	<input type="checkbox"/> E. Open House	<input type="checkbox"/> F. Walk-in	<input type="checkbox"/> G. Other

An Equal Opportunity Employer

We are an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

Provide all Information Requested

Your complete application form will be maintained in our active files for six (6) months from the date of application. A new application may be submitted at any time.

Employment Record

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume as well.

Last or present company:		Type of job:	
Address:		Brief description of job duties:	
Phone number:			
Supervisor's Name:			
Base salary:	Dates worked: From: _____ To: _____		
Reason for leaving:			
Previous company:		Type of job:	
Address:		Brief description of job duties:	
Phone number:			
Supervisor's Name:			
Base salary:	Dates worked: From: _____ To: _____		
Reason for leaving:			
Previous company:		Type of job:	
Address:		Brief description of job duties:	
Phone number:			
Supervisor's Name:			
Base salary:	Dates worked: From: _____ To: _____		
Reason for leaving:			

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Education

School Name:	Location: (City, State)	Major Course or Subject	Dates Attended From To		Graduated Yes No		Degree
High School:							
Technical/Trade School:							
College: (List all attended)							
Other Education/Training:							

Outside Activities

Professional memberships, certificate, or licenses held: *(Exclude those indicating race, color, religion, sex, national origin, age or handicap)*

Past and present civic or cultural activities — including offices held:

Hobbies/Interests:

Special Skills

To be completed by applicant for office/clerical work:		To be completed by applicant for shop/plant work:	
Typing: <input type="checkbox"/> Yes <input type="checkbox"/> No	Words per minute:	Types of machines operated:	Years of experience:
Dictation: <input type="checkbox"/> Yes <input type="checkbox"/> No	Words per minute:		
<i>Computer Skills:</i>			
Hardware:	Software:		
<i>Other skills and/or equipment/language experience you have acquired:</i>			
		Served apprenticeship: <input type="checkbox"/> Yes <input type="checkbox"/> No	Type:

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Professional/Work References

List three references including at least one person who is not related to you who have knowledge of your qualifications for the position for which you are interested in.

Name	Title/Relationship	Address: (street, city, zip code)	Phone Number (Include Area Code)	Occupation
1.				
2.				
3.				

May we contact your present employer? Yes
 No

Wage or salary required: _____

Date available to start work: _____

Have you ever been convicted of a felony, or a misdemeanor involving any violent act, use or possession of a weapon or act of dishonesty for which the record has not been sealed or expunged?

Yes No

If yes, please briefly describe the nature of the crime(s), the date and place of conviction and the legal disposition of the case. This company will not deny employment to any applicant solely because the person has been convicted of a crime. The company however, may consider the nature, date and circumstances of the offense as well as whether the offense is relevant to the duties of the position applied for.

Please read and sign this form in the space provided below. Your written authorization is necessary for completion of the application process.

I, _____, hereby authorize Select Aerospace Industries Inc. to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that Select Aerospace Industries Inc. will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

Signature: _____ Date: _____

Applicant's Name (Printed): _____