



## APPLICATION FOR EMPLOYMENT

DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

To be considered for employment by Spirco, you must fill out this employment application completely and answer all questions. You may mail or fax this application to us, along with references, copies of any letters of recommendations or any other materials that may be pertinent to your employment.

### Personal Information

Name: \_\_\_\_\_  
(Last) (First) (Middle)Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: \_\_\_\_\_ SS#: \_\_\_\_\_

Are you legally eligible to work in the United States? (circle one) Yes No

Position Applied For: \_\_\_\_\_ Referred by: \_\_\_\_\_

Have you ever applied to Spirco before? (circle one) Yes No If yes, when? \_\_\_\_\_

Would you prefer to work Full time Part time Temporary (circle one)

If employed, how soon could you start? \_\_\_\_\_

Names of friends and/or relatives employed by Spirco: \_\_\_\_\_

Do you have any friends and/or relatives employed in the metal building industry? Yes No

If yes, please explain: \_\_\_\_\_

U.S. Armed Forces? Yes No (circle one) If yes, what branch? \_\_\_\_\_

Have you been convicted of a felony within the past seven years? Yes No If yes, please

explain: \_\_\_\_\_

### Education

	Name and Location of School	Years Attended	Year Graduated	Major
High School				
College				
Other				

## Employment History (Please go back at least three years.)

EMPLOYER	DATE
Name	From <span style="float: right;">To</span>
Address	Position Held
City	Salary / Wage
Contact Person	Phone Number
Reason For Leaving	

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Driver's License # \_\_\_\_\_ State \_\_\_\_\_

I authorize investigation of all statements contained in this application. I understand and agree that if I am employed, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time.

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