

APPLICATION FOR EMPLOYMENT

ARS Products is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

POS DESIRED _____ AVAIL DATE _____ SALARY DESIRED \$ _____

DATE ____/____/____

SOC. SEC. _____ - _____ - _____

NAME _____, _____ M.I. _____
LAST FIRST

HOME ADDRESS _____

CITY _____, ST _____ ZIP _____

MAIL ADDRESS _____

(IF DIFFERENT FROM HOME ADDRESS ABOVE)

CITY _____, ST _____ ZIP _____

EMAIL _____

HOME PHONE (_____) _____ - _____

ALT. PHONE (_____) _____ - _____ TYPE _____

EMPLOYMENT HISTORY

FROM: ____/____/____
MO YEAR COMPANY NAME CITY STATE

TO: ____/____/____
MO YEAR CO TELEPHONE NUMBER JOB TITLE / POSITION \$ START PAY RATE/HR \$ END PAY RATE / HR

JOB DUTIES: _____

SUPERVISOR'S NAME REASON FOR LEAVING

FROM: ____/____/____
MO YEAR COMPANY NAME CITY STATE

TO: ____/____/____
MO YEAR CO TELEPHONE NUMBER JOB TITLE / POSITION \$ START PAY RATE/HR \$ END PAY RATE / HR

JOB DUTIES: _____

SUPERVISOR'S NAME REASON FOR LEAVING

FROM: ____/____/____
MO YEAR COMPANY NAME CITY STATE

TO: ____/____/____
MO YEAR CO TELEPHONE NUMBER JOB TITLE / POSITION \$ START PAY RATE/HR \$ END PAY RATE / HR

JOB DUTIES: _____

SUPERVISOR'S NAME REASON FOR LEAVING

EMPLOYMENT CONTINUED

FROM: _____ / _____
MO YEAR COMPANY NAME CITY STATE

TO: _____ / _____
MO YEAR CO TELEPHONE NUMBER JOB TITLE / POSITION \$ START PAY RATE/HR \$ END PAY RATE / HR

JOB DUTIES: _____

SUPERVISOR'S NAME REASON FOR LEAVING

EDUCATION

PLEASE CHECK: COLLEGE DEGREE: _____ TRADE SCHOOL GRAD HS DIPLOMA GED YEAR REC'D _____ NO GED

	NAME AND LOCATION	YRS ATTENDED	DID YOU GRADUATE?	DEGREE RECEIVED OR COURSE PROGRAM
HIGH SCHOOL				
COLLEGE, TRADE OR BUSINESS SCHOOL				

3 PROFESSIONAL REFERENCES

NAME & COMPANY	TITLE	ADDRESS	PHONE NUMBER

DO YOU HAVE A VALID DRIVERS LICENSE? _____ STATE _____ EXP. _____ # _____

ARE YOU A U.S. CITIZEN, OR ARE YOU OTHERWISE AUTHORIZED TO WORK IN THE U.S. WITHOUT RESTRICTION? [] YES [] NO

AUTHORIZATION

My signature certifies that the facts contained in this application are true and complete to the best of my knowledge. I also acknowledge that should I be employed; any falsified statements in this application will be grounds for immediate dismissal. I authorize the investigation of all statements contained within, including verification of all education, employment and personal references. "I authorize the release of any and all pertinent information from the above listed institutions, companies and individuals and release ARS Products LLC from all liability for any damage that may result from utilization of such information."

SIGNATURE OF APPLICANT _____ DATE _____

DO NOT WRITE BELOW THIS AREA

RESULTS
Employed: YES [] NO []
If Yes, Job Title: _____ Department _____
Date beginning Employment _____ Compensation \$ _____ per _____
Interviewed by: _____ Date: _____