



Application For Employment

Personal Information			
Name:		Date:	
Address:		City:	State: Zip:
Phone Number:		Email Address:	
Birthdate:	Are You A U.S. Citizen?	Date Available To Work:	
Have You Ever Been Convicted Of A Felony?		Employment Desired: Full-time, Part-time, Seasonal	
Education			
High School:	Diploma or GED:	Year Graduated:	
College:	Degree:	Year Graduated:	
Vocational School:	Degree:	Year Graduated:	
Certifications:	State:	Expires:	
Training:	Trained By:	Year Completed:	
Medical Information			
Are You Able To Physically Perform The Essential Functions Of This Job?			
Have You Ever Been Injured On The Job?			
Will You Consent To Pre-employment Drug Screening If Required?			

Medical Policy

I understand that as required by the Department of Transportation (D.O.T.), company policy, and/or contractual agreements that all applicants/employees must submit to substances abuse testing upon request, which will include alcohol testing by breath, saliva, confirmed by a blood alcohol test or testing and confirmation by a Department of Transportation (D.O.T.) approved calibrated breath analyzer. I acknowledge that if I test positive for abuse of controlled or illegal substances and or alcohol, my position with the company may be terminated. The results of the drug test will be maintained by the drug testing company that will report whether the test results were positive or negative, and if positive, the identity of the controlled substances for which the test was positive. The results will not be released to any additional parties without my writing authorization.

Employment History

Former Employer:	City, State	Dates Employed:
Job Title:	Annual Income:	Reason For Leaving:

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References

Name:	Phone Number:	Relationship:
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Military Service

Are You A Veteran or In National Guard?	Branch:	Time Of Service:
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Employment Disclaimer

I have read, understand, and accept the conditions of Trust Thermal's employment policies. I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions, or misrepresentations may result in my dismissal. I authorize Trust Thermal to investigate the facts set forth in this application and release the employer from any liability. The employer may contact any listed references on the application. I acknowledge and understand that the company is an 'at will' employer. Therefore, any employee may resign at any time, just as the the employer may terminate the employment at any time, with or without cause, with or without notice to the other party. I agree to the terms and policies listed in this application.

Signature

Print Name:	Signature:	Date:
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Interview Notes: *(office use)*

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