



Employment Application

An Equal Opportunity Employer
Please Print Clearly

Date _____ Last Name _____ First Name _____ Middle _____
Present Address

 No. & Street _____ City _____ State _____ Zip Code _____
Permanent Address (if different from present address):

 No. & Street _____ City _____ State _____ Zip Code _____
 Business Phone _____ Home Phone _____ Email Address _____

Employment Desired

Position Applying for:
 Traffic Control Rental Department Sign Shop Yard Help Trucking (Class A required)
 Sign Installation Mechanics Shop Office Staff/Administration Traffic Control Design

Are you applying for:
 Regular full-time work? Yes No
 Regular part-time work? Yes No
 Temporary work, e.g., summer or holiday work? Yes No
 What days and hours are you available to work? _____
 If applying for temporary work, during what period of time will you be available?
 From: _____ To: _____
 Are you available for work on weekends? Yes No
 Are you available for work during evenings/nights? Yes No
 Would you be available to work overtime, if necessary? Yes No
 If hired, what date can you start work? _____

Personal Information

How did you hear about our company and this job opening? _____

 Have you ever applied to or worked for KRC SAFETY CO., Inc before? Yes No
 If yes, when? _____
 If hired, would you have a reliable means of transportation to and from work? Yes No
 Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.) Yes No
 Are you able to perform the essential functions of the job for which you are applying, either without reasonable accommodation? Yes No
 If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible Applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill And agility tests.)

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale, or if doing so could create conflicts of interest.



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Education, Training, and Experience

	No. of Years Completed	Did you Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree or Diploma
High School Name _____ Address _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
College/ University Name _____ Address _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Vocational/ Business Name _____ Address _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Health Care Training Name _____ Address _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Do you have any other experience, training, qualifications, or skills that you feel make you especially suited for work at KRC SAFETY CO., INC Yes No

If so, please explain:

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

Name of Employer	Phone Number	Type of Business	Your Supervisors Name
Address & Street	City	State	Zip Code
Dates of Employment: _____ to _____			
Your Position and Duties			
Reason for Leaving			
Current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	



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Employment History Cont.

Name of Employer _____ Phone Number _____ Type of Business _____ Your Supervisors Name _____
Address & Street _____ City _____ State _____ Zip Code _____
Dates of Employment: _____ to _____

Your Position and Duties _____

Reason for Leaving _____
Current employer? Yes No May we contact this employer for a reference? Yes No
.....

Name of Employer _____ Phone Number _____ Type of Business _____ Your Supervisors Name _____
Address & Street _____ City _____ State _____ Zip Code _____
Dates of Employment: _____ to _____

Your Position and Duties _____

Reason for Leaving _____
Current employer? Yes No May we contact this employer for a reference? Yes No

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

First Name _____ Last Name _____ Phone Number _____
Address & Street _____ City _____ State _____ Zip Code _____
Occupations _____ No. of Years Acquainted _____

First Name _____ Last Name _____ Phone Number _____
Address & Street _____ City _____ State _____ Zip Code _____
Occupations _____ No. of Years Acquainted _____

First Name _____ Last Name _____ Phone Number _____
Address & Street _____ City _____ State _____ Zip Code _____
Occupations _____ No. of Years Acquainted _____



Employment Application

Please Read Carefully, Initial Each Paragraph and Sign Below

Initials I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that my omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials I hereby authorize KRC SAFETY CO., INC. to thoroughly investigate my references, work record, education and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

Initials In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

Applicant's Signature

Date