



www.beckertire.com

EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. It is our policy to abide by all Federal, State, and local laws concerning discrimination in employment. No question in this application is intended to elicit information in violation of any such law nor will any information obtained in response to any questions be used in violation of any such law.

POSITION(S) APPLIED FOR		APPLICATION DATE	
LAST NAME	FIRST NAME	MIDDLE INITIAL	
ADDRESS	CITY	STATE	ZIP
TELEPHONE	SOCIAL SECURITY NUMBER	DRIVERS LICENSE NO. (IF APPLICABLE)	
DATE AVAILABLE FOR WORK	EMPLOYMENT TYPE <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Co-op		
Were you previously employed by this organization? <input type="checkbox"/> Yes, Date(s) _____		Department/Position _____ <input type="checkbox"/> No	
List any relatives or friends working for this organization:		NAME _____	RELATIONSHIP _____

WORK EXPERIENCE - LIST PRESENT AND FORMER EMPLOYERS BEGINNING WITH MOST RECENT

FROM	TO	COMPANY NAME AND ADDRESS	TELEPHONE
POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR AND TITLE		LAST WAGES _____ per _____	REASON FOR LEAVING
FROM	TO	COMPANY NAME AND ADDRESS	TELEPHONE
POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR AND TITLE		LAST WAGES _____ per _____	REASON FOR LEAVING
FROM	TO	COMPANY NAME AND ADDRESS	TELEPHONE
POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR AND TITLE		LAST WAGES _____ per _____	REASON FOR LEAVING
FROM	TO	COMPANY NAME AND ADDRESS	TELEPHONE
POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR AND TITLE		LAST WAGES _____ per _____	REASON FOR LEAVING
May we contact the above employers? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", indicate which one(s) you do not wish us to contact.			
Have you served an apprenticeship? <input type="checkbox"/> No <input type="checkbox"/> Yes		TYPE OF TRADE	DATES
If Yes where?			

SPECIAL SKILLS AND QUALIFICATIONS - MECHANICAL AND/OR TECHNICAL EXPERIENCE AND ABILITIES

EDUCATION

NAME	ADDRESS	YEARS COMPLETED	DID YOU GRADUATE	COURSE OF STUDY
HIGH SCHOOL				
COLLEGE				
OTHER				

REFERENCES

NAME AND ADDRESS	TELEPHONE	YEARS KNOWN

MISCELLANEOUS INFORMATION

Have you been convicted of a crime in the past 7 years, excluding misdemeanors and summary offenses, which has not been annulled, expunged, or sealed by a court? (A conviction record will not necessarily be a bar to employment.) Yes No

If "Yes" please explain and describe in full detail: _____

Can you verify your legal rights to work in the U.S. by providing a birth certificate, proof of U.S. Citizenship, or by some other means? Yes No

APPLICANT'S CERTIFICATION --- Please read carefully before signing.

I certify that, to the best of my knowledge and belief, the answers given by me to the foregoing questions and statements made by me in this application are correct and complete. I understand that misrepresentation or omission of facts in this application may result in my discharge.

If employed, I understand and agree that such employment may be terminated at any time, without prior notice, and that my employment will not be governed by any expressed or implied contract but is at-will.

I hereby give the Employer the right to investigate all references unless otherwise stated herein.

APPLICANT'S SIGNATURE	DATE
-----------------------	------

DO NOT WRITE BELOW - FOR COMPANY USE ONLY

INTERVIEW NO YES DATE _____ TIME _____	Acceptable for Employment? <input type="checkbox"/> Yes <input type="checkbox"/> No DEPT. _____ OCCUPATION _____ CLOCK NO. _____ RATE _____
Interviewed By _____	