

# Employment Application

## BEARING-BELT & CHAIN, INC.

729 E. Buckeye Rd.  
Phoenix, AZ 85034  
602-252-6541  
602-254-8151 Fax

Position applying for: \_\_\_\_\_

### EMPLOYEE INFORMATION

Name: \_\_\_\_\_

Last First Middle  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_ Alternate telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Are you able to perform the essential functions of the position with or without accommodations?

☐ Yes ☐ No

If necessary for the job are you older than:

☐ 14 ☐ 15 ☐ 16 (Check one)

☐ 18 ☐ 19 ☐ 21

I am legally eligible for employment in the U.S.?

☐ Yes ☐ No

I am seeking a permanent position: ☐ Yes ☐ No

**I will be able to report to work**

\_\_\_\_\_ days after being notified I am hired.

**If necessary for the job, I am able to:**

Work overtime?

☐ Yes ☐ No

Provide a valid Driver's License?

☐ Yes ☐ No

If so, fill out the following:

Issuing state: \_\_\_\_\_

Type: \_\_\_\_\_

Endorsement(s): ☐ Hazardous Material ☐ Passengers

☐ Tankers ☐ Tank with Hazardous Materials

☐ School Bus ☐ Double/Triple trailers

Work the following shifts: (check all that apply)

☐ Any ☐ Day ☐ Night ☐ Swing ☐ Rotating

☐ Split ☐ Graveyard Other: \_\_\_\_\_

### EMPLOYMENT HISTORY

List most recent employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary following this section or on an extra sheet of paper if necessary. No more than 10 years history recommended.

Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor:	Telephone:	
Per:			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor:	Telephone:	
Per:			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor:	Telephone:	
Per:			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor:	Telephone:	
Per:			

Summarize other employment related to this job:

### EDUCATION

	Institution name	Years completed	Field of study	Graduate or degree
High school				
College/university				
Business/technical				
Additional				

### MILITARY

Are you a veteran? ☐ Yes ☐ No  
Duty/specialized training: \_\_\_\_\_

### SKILLS & QUALIFICATIONS

Other qualifications such as special skills, abilities or honors that should be considered: \_\_\_\_\_

Types of computers, software, and other equipment you are qualified to operate or repair: \_\_\_\_\_

Professional licenses, certifications or registrations: \_\_\_\_\_

Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention: \_\_\_\_\_

### REFERENCES

List two personal references who are not relatives or former supervisors.

Name	Address	Telephone	Occupation	Years known
Name	Address	Telephone	Occupation	Years known

### CONTACT

In case of accident or illness, please contact: Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

### INFORMATION TO THE APPLICANT

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**Equal Employment Opportunity:** While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no effect on your application for employment.

## EQUAL OPPORTUNITY EMPLOYER

### Initials:

- \_\_\_\_\_ I certify that the answers given by me to the foregoing questions and statements on the employment application and/or during the employment interview process are true and correct without any consequential omissions of any kind whatsoever. I understand that any misleading or incorrect statements may render this application void and, if employed, would be cause for my termination. I further agree that the Company shall not be liable in any respect if my employment is terminated because of falsity of statements, answers or omissions made by me in this application.
- \_\_\_\_\_ I authorize the companies, schools, persons or entities given during the employment process, and the employer (if employed), while employed, or during internal investigations, as references or past employers or affiliations, to give any information regarding my employment, character, qualifications, certifications and licenses, and hereby release said companies, schools, persons or entities from all liability for any damage for issuing this information. A favorable result may be a condition of employment, commencement, or continuation of any employment duties where elements are job-related.
- \_\_\_\_\_ I understand that a background check may be conducted during the employment process and that if employed, a background check may be conducted periodically as deemed necessary by the employer.
- \_\_\_\_\_ I understand that a credit check may be conducted during the employment process and that if employed, a background check may be conducted periodically as deemed necessary by the employer.
- \_\_\_\_\_ I understand that I may be required to have a medical examination and/or drug and alcohol test after an offer of employment has been made and prior to the commencement of my employment duties as well as any time throughout my employment according to company policy. A favorable result on the medical examination and/or drug and alcohol test would be a condition of my employment or commencement of any employment duties.
- \_\_\_\_\_ I realize that operating conditions may require me to work shifts or work hours scheduled other than the one for which I am applying and I agree to such scheduling change as directed by my supervisor or the management.
- \_\_\_\_\_ I understand that if hired, employment is not for a specified or definite term and that I may resign, or I may be discharged at any time, for any reason, with or without good cause and with or without prior notice. I further understand that this policy cannot be changed or amended except by written agreement signed by me and by a corporate officer. I understand that this is an application for employment and that no employment contract is being offered.
- \_\_\_\_\_ I understand that only United States citizens or aliens who are legally entitled to work in the United States are eligible for employment.
- \_\_\_\_\_ My employment shall be in accordance with the terms of this application, all safety and incident reporting rules, and all other Company rules and regulations. The Company shall have the right to amend, modify, or revoke its rules and regulations at any time. I will familiarize myself promptly with such rules and regulations and will be bound by the rules and regulations now or hereafter in effect.
- \_\_\_\_\_ I certify that as part of the application process, I have been provided with a written job description or have had the opportunity to review and/or discuss the requirements for the position of \_\_\_\_\_. I certify that I understand each requirement and that I am capable of meeting each and every requirement.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_