

Watry Industries, LLC Employment Application

Failure to fill out this application in its entirety will make it null and void. If you have any questions or need assistance, please ask Human Resources (HR).

Notice to Applicants – We are an Equal Opportunity Employer. We do not discriminate on the basis of race, color, religion, sex, age, national origin, marital or veteran status, citizenship, or disability.

JOB(S) APPLYING FO	OR:				
FULL TIME PART TIME _		TODAY'S DATE			
PERSONAL DATA:					
NAME:LA	ST	FIRST	,	MIDDLE	
ADDRESS:					
CITY		_STATE _		ZIP	
PHONE #		_ SOCIAL S	ECURITY#		
Are you 18 or over? Y for employment)	es No	(If not,	eligibility for a wo	ork permit is a	a prerequisite
Are you prevented from Immigration status? Yes	•	_ , ,	l in this country be	ecause of Visa	a or
Have you ever been or	are you now a mei	mber of the	Armed Services?	Yes1	No
Are you a member of a	Reserve Organiza	tion? Yes_	No		
Were you ever employe	ed Here? Yes	No	When		
Have you ever applied	Here? Yes	No	When		
Are you now, or do you	expect to be enga	aged in any o	other business or e	mployment?	
Yes No	_ Please explain				
Have you ever been con excluding minor traffic			•		
If an offer of employme completes our medical hearing test, a work ass examination? Yes	examination. Our essment, and a dru	examination	n includes: a basic	physical, a b	paseline
FOR DRIVING JOBS	SONLY: Do you				_ No

EDUCATION:	Name	Course of	Study (Major)	Graduate/Date
College				
Tech/Specialty School				
Tech/specialty sensor				
EMPLOYMENT HISTO				mployer, and list
all employers in consecu	itive order. Ma	ake notice of self-em	iployment.	
Current Employer:			Phone#:	
Address:			1 none	
City		State	Zip _	
Job Title		_From	To	
Final Wage		Reason for leaving _		
May we contact your Em	ployer? Yes	No		
Employer:			Phone#:	
Address:				
City		State	Zip _	
Job Title				
Final Wage		_Reason for leaving		
Employer:			Phone#:	
Address:				
City				
Job Title				
Final Wage		Reason for leaving _		
REFERENCES:	(Do r	not list relatives or for	rmer employees)	
Name		Address	Phone	e#
1				
2				
3				
"I understand that this an	nligation aboll b	a aanaidarad aatiya f	for no more than 15	davia After that
"I understand that this app time, I must resubmit a co	L			•
understand that neither th				
an employment contract u				. .
an employment contract t	aniess a specific	document is execute	a in writing by the	employer.
The information I've given in	true and accurate to	o the best of my knowled	ge. I understand that if	f I'm employed by this
company, any falsification or r				
company has my permission to				
understand that I have a right t the information obtained by the				
does not constitute an employr				
employment at any time with o	or without notice an			
discretion, with or without cau	se or notice.			
APPLICANT'S SIGNAT	URE		DAT	E