



## Employment Application

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

**\*Dowdy is a drug-free workplace. All applicants must submit to and successfully pass a pre-employment drug screening prior to being hired.**

**We participate in E-verify and will provide the federal government with your Form I-9 information to confirm that you are legally authorized to work in the U.S.**

**\*Some positions may require a Level 1 background check. I understand that should my background check indicate I am disqualified from passing a Level 1 clearance, my offer of employment may be revoked.**

### Applicant Information (Other Than CDL)

Referral Source:

Last Name:	First:	M.I.:
Street Address:		Apartment/Unit #:
City:	State:	Zip Code:
Phone #:	E-mail Address:	
Date Available:		
Are you a Citizen of the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, are you authorized to Work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever worked for this company?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, give dates?
Do you have any relatives currently working for the company?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, who?

### Employment Information

Position Applied For:	When will you be available?			
Work Preference	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Evenings	<input type="checkbox"/> Weekends
Are you at least 18 years of age?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Will you work overtime when necessary?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you on layoff and/or subject recall?	<input type="checkbox"/> Yes <input type="checkbox"/> No			

### Education

Highschool:	City:	State:
Did you receive?	<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Other	
College:	City:	State:
Did you graduate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Degree:
Other:	City:	State:
Did you graduate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Degree:

## Previous Employment

Company:	Phone:	
Address:		Supervisor:
Job Title:	Starting Salary: \$	Ending Salary: \$
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your previous supervisor for reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Company:	Phone:	
Address:		Supervisor:
Job Title:	Starting Salary: \$	Ending Salary: \$
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your previous supervisor for reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Company:	Phone:	
Address:		Supervisor:
Job Title:	Starting Salary: \$	Ending Salary: \$
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your previous supervisor for reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

## Disclaimer And Signature

1. I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts on this application (or on any required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.
2. I authorize the investigation of all statements contained in this application and release from all liability any persons or employers supplying such information, and I also release the company from all liability that might result from making the investigation.
3. If I am offered and accept a position, I agree to conform to all existing and any future Company rules and regulations. I understand that the Company reserves the right to change wages, hours and working conditions as deemed necessary. I ALSO UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT WILL BE AT-WILL, MEANING THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME WITHOUT PRIOR NOTICE OR CAUSE AS LONG AS THE REASON IS NOT ILLEGAL.
4. I understand that to comply with the Department of Homeland Security, U.S. Citizenship and Immigration Services, I am to provide valid proof of identity and employment eligibility to work.
5. I have read and reviewed the information provided in the application and the above statements. By signing this application for employment, I certify that I understand all parts of it and have answered all questions completely and Fully.

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

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