



Signs · Banners · Magnets · Vehicle Wraps & More!

Employment Application

INTERNAL USE ONLY - DO NOT WRITE IN THIS SPACE

Date Rec'd _____ Time Rec'd _____
 Received By _____ Applicant # _____

880 E Ralph Hall Pkwy • Rockwall, TX 75032 • 972.771.7818 • www.SignsOfRockwall.com

PRINT IN BLACK INK OR TYPE. These instructions must be followed exactly. Fill out application form completely. If questions are not applicable, enter "NA". **Do not leave questions blank.** Be sure to sign when completed. Signature Signs & Graphics is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in the employment or the provision of services. You may make copies of this application and enter different position titles, but each copy must be signed. Resumes will not be accepted in lieu of applications, unless specifically stated in the job vacancy notice.

APPLICANT INFORMATION

Full Name: _____
Last First Middle

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone: _____ Alternate Phone: _____

Email Address: _____

Date of Birth: _____ Date Available: _____ Desired Salary: _____

Position Applied For: _____

Are you a citizen of the United States? YES NO Are you at least 21 years of age? YES NO

If no, are you authorized to work in the U.S.? YES NO Have you ever worked for this company? YES NO

Do you have a current, valid driver license? YES NO If yes, when? _____

Have you ever been convicted of, or have you pleaded guilty or no contest to, a felony offense? YES NO
 Answering "yes" to this question will not automatically bar you from employment unless applicable law requires such action.

If yes, explain: _____

EDUCATION

| | School Name | Years Completed | Field of Study | Type of Diploma or Degree |
|--------------------|-------------|-----------------|----------------|---------------------------|
| High School | | | | |
| College/University | | | | |
| Business/Technical | | | | |
| Additional | | | | |

MILITARY SERVICE

Are you a veteran? YES NO Branch: _____

Dates Served: _____ Rank at Discharge: _____

Type of Discharge: _____ MOS/AFSC/NEC/Designator: _____

If other than honorable, please explain: _____

EMPLOYMENT HISTORY

List most recent employment first. Include summer or temporary jobs. Employer addresses must be complete, including phone numbers, addresses and zip codes. Answer all questions and completely summarize your experience including technical and managerial responsibilities and any special training, skills and qualifications for each position you have held. No more than 10 years history recommended.

Company: _____ Phone: _____

Full Address: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Starting Date: _____ Ending Date: _____ Supervisor's Name: _____

Responsibilities & Duties: _____

Reason for Leaving: _____ May we contact this company for a reference? YES NO

Company: _____ Phone: _____

Full Address: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Starting Date: _____ Ending Date: _____ Supervisor's Name: _____

Responsibilities & Duties: _____

Reason for Leaving: _____ May we contact this company for a reference? YES NO

Company: _____ Phone: _____

Full Address: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Starting Date: _____ Ending Date: _____ Supervisor's Name: _____

Responsibilities & Duties: _____

Reason for Leaving: _____ May we contact this company for a reference? YES NO

Company: _____ Phone: _____

Full Address: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Starting Date: _____ Ending Date: _____ Supervisor's Name: _____

Responsibilities & Duties: _____

Reason for Leaving: _____ May we contact this company for a reference? YES NO

REFERENCES

List three personal or professional references who are not relatives or former supervisors.

Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

SKILLS & QUALIFICATIONS

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

Types of computer software that you are proficient with:

Professional licenses, certifications or registrations:

Are you fluent in any languages other than English?

INFORMATION TO THE APPLICANT

I certify that I have fully and accurately answered all questions and have given all information requested in this application for employment, and I understand that any wrong or incomplete information on the form may disqualify me for further consideration for employment or, if discovered after I am hired, may be grounds for my immediate dismissal. I understand that all such information is subject to verification by the Company, and hereby give my consent to the Company to investigate my background and qualifications using any means, sources, and outside investigators at its disposal. I agree to undergo any type of drug and/or alcohol testing that the Company may require at any time. Finally, I understand that submission of this application does not necessarily mean that I will be hired, and that if I am hired, my employment will be at will, and either I or the Company may terminate my employment at any time, with or without notice or reason.

Signature of Applicant

Date

FOR OFFICE USE ONLY