**Employment Application**

If you need assistance completing this application, notify the person who gave you the application form and accommodations will be made for you whenever possible.

Note: This application must be fully and accurately completed in order to be processed. Please attach additional sheets if you need additional space.

***Equal Opportunity Employer:*** *Mission Support Inc, is an Equal Opportunity Employer. This means that we will extend equal opportunity for employment and provide employment advancement on the basis of merit within the context of its unique business environment to all individuals without regard for race, religion, color, sex, national origin, age, disability, or veteran status. This policy affirms that Mission Support is commitment to fair employment and will comply with all applicable laws governing equal employment opportunity. This policy extends to all applicants and employees and to all aspects of the employment relationship.*

**Today’s Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position(s) Applying For**: ☐ Administrative ☐ Engineering ☐ Quality Control ☐ Manufacturing.

Position Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employment Desired**: ☐ Full-Time ☐ Part-Time / Hours Available \_\_\_\_\_\_\_\_\_

**Date Available For Work:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How did you hear about Mission Support Inc.?** ☐ Company Website ☐ Workforce Services ☐ Recruiting Website (i.e. Indeed) ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **PERSONAL IDENTIFICATION**

|  |  |  |
| --- | --- | --- |
| **Name:**  |  |  |
| **Street Address:**  |  |  |
| **City / State / Zip:**  |  |  |
| **Home Phone:**  | **Cell Phone:**  |  |
| **Contact Email:**  |  |  |
| **Driver’s License Number:**  | **Class:**  | **State of Issue:**  |

 **Are you 18 Years of Age or Older?** ☐ Yes ☐ No

**Have you ever applied here before?** ☐ Yes ☐ No

If “Yes,” when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Have you previously been employed by Mission Support Inc.?** ☐ Yes ☐ No

If “Yes,” when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMPLOYMENT HISTORY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company (Employer):**  |  |  | **Position Title:**  |  |
| **Street Address / City / State / Zip:**  |  |  |  |  |
| **Start Date:**  |  |  | **End Date:**  |  |
| ☐ **Hourly**  | ☐ **Salaried**  |  | **Starting Pay:**  | **Ending Pay:**  |
| **Name of Supervisor:**  |  |  | **Supervisor Title:**  |  |
| **The Supervisor may be contacted.**  | ☐ Yes  | ☐ No  |  |  |
| **Responsibilities:**  |  |  |  |
| **Reason for leaving or seeking other employment:**  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company (Employer):**  |  |  | **Position Title:**  |  |
| **Street Address / City / State / Zip:**  |  |  |  |  |
| **Start Date:**  |  |  | **End Date:**  |  |
| ☐ **Hourly**  | ☐ **Salaried**  |  | **Starting Pay:**  | **Ending Pay:**  |
| **Name of Supervisor:**  |  |  | **Supervisor Title:**  |  |
| **The Supervisor may be contacted.**  | ☐ Yes  | ☐ No |  |  |
| **Responsibilities:**  |  |  |  |
| **Reason for leaving or seeking other Employment:**  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Company (Employer):**  |  |  | **Position Title:**  |
| **Street Address / City / State / Zip:**  |  |  |  |
| **Start Date:**  |  |  | **End Date:**  |
| ☐ **Hourly**  | ☐ **Salaried**  |  | **Starting Pay: Ending Pay:**  |
| **Name of Supervisor:**  |  |  | **Supervisor Title:**  |
| **The Supervisor may be contacted.**  | ☐ Yes  | ☐ No |  |
| **Responsibilities:**  |  |  |
| **Reason for leaving or seeking other employment:**  |  |  |

**Education**

**Have you ever worked or attended school under another name?** ☐ Yes ☐ No

If “Yes,” under what name(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please list your educational experiences below to include current attendance, graduated, or incomplete. This includes high school, GED, university, college, vocational, and technical schools:**

|  |  |  |  |
| --- | --- | --- | --- |
| **School/Institution**  | **Diploma or Certificate?**  | **What did you study?**  | **Additional Comments**  |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |

# Skills/Qualifications

**Please answer the below questions as they related to the job for which you are applying.**

|  |
| --- |
| What skills do you have that are related to the job for which you are applying?   |
| Do you have any qualifications/certifications that are related to the job for which you are applying?  |
| What machines or equipment can you operate related to the job for which you are applying?   |

 **REFERENCES**

Are you currently employed? ☐ Yes ☐ No

If yes, may we contact your present employer? ☐ Yes ☐ No

**Please provide three (3) professional references who are not related to you below:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Contact Name**  | **Reference Type**  | **Company Name** **(If applicable)**  | **Phone**  |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |

 **PRIOR EVENTS**

Have you ever been convicted of any law violation, except a minor traffic violation? ☐ No☐ Yes

If yes please, explain. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# APPLICANT AGREEMENT

(Read carefully before signing) All information provided by me is true and correct to the best of my knowledge. I understand omissions or misrepresentations may result in rejection of my application or, if employed, may result in subsequent dismissal. I hereby authorize any former employer, person, school, firm, or corporation listed hereon, including this company, to answer R questions related to employment and agree to release from liability and hold all persons harmless for giving any and all truthful information within their knowledge or records. I understand this is a preliminary application and not a contract to employ me. Furthermore, in the event I am employed, my employment shall be completely voluntary and may be terminated at will at any time by either myself or the company. I understand that no one other than the company president has authority to enter into any employment agreement to the contrary. I agree to take a job-related physical examination or a drug/alcohol test when requested as a condition of employment. In the event the company advances me money or other this of value, I agree to repay the company and also that any amount still owing may be deducted from my finial paycheck.

***Date***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Signature of Applicant***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_