

Austin Sales Inc. dba: Austin Sales & Scaffold 7803 FM 969, Austin, TX 78724 Tel: 512-928-1136, Fax: 512-9266361 Email: sales@asiscaffold.com

We Consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital, or veteran status, or any other legally protected status.

Employment Application - (Please Print)

Position (s) Applied for	or							
Advertisement Employment Agency Friend					Inquiry Other				
				YES	NO □	If yes, when?			
Have you ever been convicted of a felony?				YES	NO □				
				Арр	lican	t Information			
Full Name:							Date:		
	Last			Firs	t		М.І.		
Address:	Street Addre	ess						Apartment/Unit #	
	City						State	ZIP Code	
Phone:						Email			
Date Available: Social			Security	/ No.:_	Desired Salary:				
Are you a citizen of the United States?			YES	NO □	YES NC If no, are you authorized to work in the U.S.? \Box				
Have you ever worked for this company?				YES	NO □	If yes, when?			
Have you ever been convicted of a felony?			YES	NO □					
If yes, expla	ain:								
					Edu	ucation			
High Schoo	ol:				Addres	ss:			
From:		То:	Die	d you gi	raduate	YES NO e?	Diploma:		
College:					Addres	s.			

From:	To:	Did you graduate?	YES	NO □	Degree:
Other:		Address:			
From:	То:	Did you graduate?	YES	NO □	Degree:
		Refere	ences		
Please list th	nree professional referen	ces.			
Full Name:					Relationship:
Company:					Phone:
Address:					
Full Name:					Relationship:
Company:					Phone:
Address:					
Full Name:					Relationship:
Company:					Phone:
Address:					
		Previous Er	nployr	nent	
Company:					Phone:
Address:					0
Job Title:		Starting Sa	alary: \$		Ending Salary: \$
Responsibilit	ies:				
From:	To:		Reaso	n for Lea	ving:
May we conta	act your previous supervis	or for a reference?	YES)]
Company:					Phone:
Address:					Supervisor:
Job Title:		Starting Sa	alary: <u>\$</u>		Ending Salary: <u>\$</u>
Responsibilit	ies:				
From:					ving:
May we conta	act your previous supervis	or for a reference?	YES		

Company:				Phone:				
Address:				Supervisor:				
Job Title:	Starting S	Salary: <u>\$</u>		Ending Salary: <u>\$</u>				
Responsibilit	ies:							
From:	То:	Reason fo	or Leaving:					
May we cont	act your previous supervisor for a reference?	YES						
Military Service								
Branch:			From:		То:			
Rank at Disc	harge:	Type of	Discharge:					
If other than	honorable, explain:							
Disclaimer and Signature								

I certify that my answers are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any application wishing to be considered for employment beyond this time period should inquire as to whether or not applications being accepted at that time

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized and regulations of the employer.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the employer.

Signature:				Date:			
		For Pers	onnel Department Use	Only			
Arrange Intervie	èw.		YES	NO			
Remarks							
Employed	YES	NO □	Date of Employment				
Job Title:			Ηοι	Irly Rate/ Salary:			
Department:							
By:				Date:			
If other than hor	norable, explain:						