

CMT COMPONENTS EMPLOYMENT APPLICATION

This application is considered active for ninety (90) days.

DRUG-FREE WORKPLACE

All employees are subject to drug and alcohol testing procedures permitted under federal and state law.

PERSONAL DATA

lease complete o	n computer or prir	nt cleraly in ink.		procedure	es permitted under	federal and state law.
Name (Last, First, I	Middle)				Contact Phone	Number
Street Address					Social Security	Number
City			State	Zip	E-mail Address	
osition(s) intereste	ed in?					
alary Requiremer	nts			Are you under th	e age of 18?	☐ Yes ☐ No
	\$		Hour Year	If yes, sto	ite your age	
-		•	? Yes No			
				es for any employer? Yes	No	
			es No			
Can you work:				Weekends		
re there any time	es or days you can	not work?				
mployment. You on nd/or expunged	do not need to disc from your record.	close any information	regarding arrests or any c	vill be considered as part of yer riminal charges and/or convic	tions that have been e	rased, annulled, sealed
DUCATIO	N					
ype of School	Name of	School	Location of School	Area of Study	Last Year Completed	Did You Earn a Degree or Diploma?
ligh School						Yes No
College						Yes No
Graduate						Yes No
Other						
REFERENCI		an relatives) we ma	y contact who have know	ledge of your job-related ski	lle	
indines of fiftee	Name	Telephone Contact/Email Contact		Address/City/State		Occupation
						-

EMPLOYMENT HISTORY

BEGINNING WITH YOUR MOST RECENT EMPLOYER, LIST ALL EMPLOYMENT INCLUDING MILITARY SERVICE AND SELF-EMPLOYMENT. Please account for all periods of unemployment. All sections of this application must be complete even if a resume is attached.

Name of present or last employer	Job Title/Responsibilities	From (Mo. & Yr.)	To (Mo. & Yr.)
Address		Supervisor Nar	ne
	Was your position: Full time Part time		
City, State, ZIP	Reason for leaving □Terminated □Voluntary □Involuntary	Starting Salary	\$
	Explain		
Phone Number		Last Salary \$	
Name of previous employer	Job Title/Responsibilities	From (Mo. & Yr.)	To (Mo. & Yr.)
Address		Supervisor Nar	ne
	Was your position Full time Part time		
City, State, ZIP	Reason for leaving Terminated Voluntary Involuntary	Starting Salary	\$
	Explain	C	
Phone Number		Last Salary \$	
Name of previous employer	Job Title/Responsibilities	From (Mo. & Yr.)	To (Mo. & Yr.)
Address		Supervisor Nar	ne
	Was your position Full time Part time	'	
City, State, ZIP	Reason for leaving □Terminated □Voluntary □Involuntary	Starting Salary	\$
	Explain		
Phone Number		Last Salary \$	
Name of previous employer	Job Title/Responsibilities	From (Mo. & Yr.)	To (Mo. & Yr.)
Address		Supervisor Nar	ne
	Was your position Full time Part time	'	
City, State, ZIP	Reason for leaving □Terminated □Voluntary □Involuntary	Starting Salary	\$
	Explain		
Phone Number		Last Salary \$	
Name of previous employer	Job Title/Responsibilities	From (Mo. & Yr.)	To (Mo. & Yr.)
Address		Supervisor Nar	<u> </u>
Address	Was your position Full time Part time	Supervisor radi	ile
City, State, ZIP	Reason for leaving Terminated Voluntary Involuntary	Starting Salary	\$
	Explain	3 ,	
Phone Number		Last Salary \$	
employment and work record. I authorize all past emp any and all information concerning my past employme personal references, and C & M Truss from any and a understand that my employment or continued employr I also understand that if employed by CMT Componeither by myself or the Company. This agreement can Finally, I understand it is unlawful for CMT Compone	e past employers and/or personal references I have provided in order loyers, educational institutions, government agencies and/or personal twork history, performance, and personal character. I hereby release II liability resulting from damages I may incur in the reference verificated is contingent upon my successfully completing both reference ents, my employment is "at will" and can be terminated at any time from the modified by any representative of the Company either in writing ents to employ anyone who is neither a citizen of the U.S. nor an alicon information I provide to the Company is authentic. Further, I certi	al references to ase all such emp ation process. I and background or any reason ng or verbally. en authorized to	release loyers, checks.

Thank you for your interest and the time you have taken to submit this application.

False information or omission of facts on this application may result in the termination of my employment with CMT Components

Applicant's Signature

Date