

**PERSONAL INFORMATION**

DATE / /

Name (Last, First, Middle):			Other names under which you have attended school or been employed:				
Street Address:		City, State & Zip:					
Social Security Number:	Home Phone:	Work Phone:	Other Phone:				
Position Applying For	Date Available / /	Are you interested in (check all that apply) <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Summer					
Days and hours available:			Are you willing to relocate? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you willing to travel? <input type="checkbox"/> Yes <input type="checkbox"/> No What percentage? _____% Salary Requirement _____				
Days	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
From							
To							
How were you referred to SRCO?							

**EDUCATION**

Name of School	City/State	Degree/Area of Study	Number of Years Attended	Did you graduate?
High School:				<input type="checkbox"/> Yes <input type="checkbox"/> No
GED:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Other School:				<input type="checkbox"/> Yes <input type="checkbox"/> No
College:				<input type="checkbox"/> Yes <input type="checkbox"/> No
College:				<input type="checkbox"/> Yes <input type="checkbox"/> No
College:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Other credentials/ licenses/ professional affiliations, etc., which are relevant to the job(s) for which you are applying.				

**U.S. MILITARY SERVICE**

Branch of Service	Technical Specialization	Rank Attained

**LEGAL**

Are you a U.S. citizen or do you have a legal right and necessary documents to work in the U.S.?  Yes  No  
 (Identity and employment eligibility of all new hires will be verified as required by the Immigration Reform and Control Act of 1986.)  
 Were you ever discharged by any company?  Yes  No If yes, give name of company(ies) \_\_\_\_\_  
 Reason for discharge \_\_\_\_\_  
 Have you ever been convicted of a crime other than a minor traffic violation? (Note: You are not obligated to discuss sealed or expunged records of conviction or arrest nor will such information be asked of you or considered in employment decisions.)  
 The existence of a criminal record will not automatically disqualify you from the job for which you are applying.  
 Yes  No If yes, please explain offense and final disposition: \_\_\_\_\_

**EMPLOYMENT HISTORY**

DATES	NAME AND ADDRESS OF EMPLOYER	POSITION HELD AND SUPERVISOR	LIST MAJOR DUTIES	SALARY OR WAGES	REASON FOR LEAVING
From: _____ /_____ mo. yr. To: _____ /_____ mo. yr.	Name _____ Address _____ City _____ State _____ Phone _____ ( ) _____	Your Job Title _____ Supervisor _____		Starting _____ Final _____	
From: _____ /_____ mo. yr. To: _____ /_____ mo. yr.	Name _____ Address _____ City _____ State _____ Phone _____ ( ) _____	Your Job Title _____ Supervisor _____		Starting _____ Final _____	
From: _____ /_____ mo. yr. To: _____ /_____ mo. yr.	Name _____ Address _____ City _____ State _____ Phone _____ ( ) _____	Your Job Title _____ Supervisor _____		Starting _____ Final _____	
From: _____ /_____ mo. yr. To: _____ /_____ mo. yr.	Name _____ Address _____ City _____ State _____ Phone _____ ( ) _____	Your Job Title _____ Supervisor _____		Starting _____ Final _____	

**REFERENCES**

Business references: Do not list relatives. Please indicate if you were employed under a different name.

Name	Address	Work Phone No.	Title	Years Known
		( )		
		( )		
		( )		

**PLEASE READ CAREFULLY**

I understand that, with my authorization, an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history, subject to applicable federal, state and/or local laws.

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

I understand and agree that, if employed, the employment will be "at will," that is, either I or SRCO may end the employment relationship at any time, for any reason, or for no reason. I understand that receipt of this application by SRCO does not imply employment, and that this application and/or any other SRCO documents, are not contracts of employment.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Experience Questionnaire

*Please check all topics that you have experience in.*

- Confined Space Entrant
- Confined Space Attendant
- Confined Space Rescue
- High Angle Rescue
- SCBA (Self Contained Breathing Apparatus) Certification
- Current SCBA Fit Test

- Scaffolding
- Trenching / Excavating
- Electrical Safety
- Health Hazards (noise, air, ergonomics, etc.)
- Fire Safety
- Personal Protective Equipment (PPE)
- Machine Guarding
- Cranes and/or Rigging
- Heavy Equipment
- Fall Protection
- Welding/Cutting

Are you certified to instruct any classes?  
If so, what?

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Do you have experience conducting any type of training?  
If so, what?

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Any additional experience you want us to know about?

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Name (Print)

Date

Phone #