

APPLICATION FOR EMPLOYMENT

It is the policy of Frost Lighting to provide equal opportunity with regard to all terms and conditions of employment. Frost Lighting complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, disability, veteran status, age or any other protected characteristic.

Name _____

Phone _____

Address _____

City/State/ZIP _____

Position applying for _____ Full Time Part Time

Special Training or Skills: (Languages, machine operation, etc.) that would benefit you in the position you are applying for _____

Date Available _____

Have you been employed here before? Yes No Dates _____

Do you have a legal right to be employed in the U.S.?

Yes (If yes, proof is required) No

Are you of legal age to work? Yes No

For Office Use Only

Applicant # _____

Hire Date _____

Position _____

Rate _____

Notes _____

Attachments

Resume

Reference Check

Interview

EDUCATIONAL BACKGROUND

Grammar School

Name and location _____

Course of study _____ Graduate Yes No Degree or Diploma _____

High School

Name and location _____

Course of study _____ Graduate Yes No Degree or Diploma _____

College

Name and location _____

Course of study _____ Graduate Yes No Degree or Diploma _____

Graduate School

Name and location _____

Course of study _____ Graduate Yes No Degree or Diploma _____

Vocational, or other training

Name and location _____

Course of study _____ Graduate Yes No Degree or Diploma _____

Continuing Education

EDUCATIONAL BACKGROUND

Place an by the employer(s) you do not want us to contact. List the most recent employer first.

1. Company Name _____ Phone () _____

Contact Name _____

Address _____ Employed From ____/____/____ to ____/____/____

Position _____ Reason for Leaving _____ Last Wage _____

2. Company Name _____ Phone () _____

Contact Name _____

Address _____ Employed From ____/____/____ to ____/____/____

Position _____ Reason for Leaving _____ Last Wage _____

3. Company Name _____ Phone () _____

Contact Name _____

Address _____ Employed From ____/____/____ to ____/____/____

Position _____ Reason for Leaving _____ Last Wage _____

4. Company Name _____ Phone () _____

Contact Name _____

Address _____ Employed From ____/____/____ to ____/____/____

Position _____ Reason for Leaving _____ Last Wage _____

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED, AND IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR FROST LIGHTING'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN ITS PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

Applicant's Signature _____ **Date** _____