



APPLICATION FOR EMPLOYMENT

Atchley Steel Company, Inc. is an Equal Opportunity Employer. Qualified applicants are considered for all positions without regard to race, color, religion, sex, marital, or veteran status or the existence of any condition or disability.

PERSONAL

Name \_\_\_\_\_ Date \_\_\_\_\_
Last First Middle

Address \_\_\_\_\_
Street City State Zip

Telephone \_\_\_\_\_ Social Security Number \_\_\_\_\_

How many years have you lived at this address? \_\_\_\_\_

Previous address \_\_\_\_\_ How long did you live there? \_\_\_\_\_

What positions are you applying for?
1. \_\_\_\_\_
2. \_\_\_\_\_

Type of Employment Desired: Full Time Part Time Either

If hired, on what date will you be available to start work? \_\_\_\_\_

Will you work overtime if asked? Yes \_\_\_\_\_ No \_\_\_\_\_

Referral Source: Advertisement Employee Relative/Employment Agency Walk In

Are you employed now? \_\_\_\_\_ If yes, give dates \_\_\_\_\_

Have you filed an application here before? \_\_\_\_\_ If yes, give dates \_\_\_\_\_

Are you 18 years of age or older? Yes \_\_\_\_\_ No \_\_\_\_\_

If hired, can you furnish proof that you are eligible to work in the U.S. as required by the Immigration Reform and Control Act \_\_\_\_\_ If not, please explain \_\_\_\_\_
(If you are unsure of what constitutes proof, ask the Human Resources representative.)

Have you ever been convicted of a crime involving DUI, dishonesty, or breach of trust (fraud)? \_\_\_\_\_ YES \_\_\_\_\_ NO.

If yes, describe in full: \_\_\_\_\_

ATCHLEY STEEL COMPANY, INC. supports the Americans with Disabilities Act. Some of the positions in the Plant and office include duties that can be difficult to perform such as heavy lifting, standing for extended periods of time, or extensive use of a telephone. If you are interviewed for a specific position, you may request a copy of the written Job Description applicable to the position for which you are applying.

**PREVIOUS EMPLOYMENT**

**Start with your present employer.**

**Please include both paid and volunteer positions.**

Employer	Dates Employed From - To	What did you like best about this Job?	
_____	_____	_____	
City, State	Telephone	Hourly Rate/Salary	What did you like least about this job?
_____	_____	Starting                  Final	_____
Job Title	_____	_____	_____
Supervisor	_____	_____	_____
Starting Duties	_____		
Leaving Duties	_____		
Reasons for Leaving	_____		

Employer	Dates Employed	What did you like best about this Job?	
_____	_____	_____	
City, State	Telephone	Hourly Rate/Salary	What did you like least about this job?
_____	_____	Starting                  Final	_____
Job Title	_____	_____	_____
Supervisor	_____	_____	_____
Starting Duties	_____		
Leaving Duties	_____		
Reasons for Leaving	_____		

Employer	Dates Employed	What did you like best about this Job?	
_____	_____	_____	
City, State	Telephone	Hourly Rate/Salary	What did you like least about this job?
_____	_____	Starting                  Final	_____
Job Title	_____	_____	_____
Supervisor	_____	_____	_____
Starting Duties	_____		
Leaving Duties	_____		
Reasons for leaving	_____		

\_\_\_\_\_ may we contact the employers listed above? \_\_\_\_\_ If no indicate below which one(s) you do not wish us to contact.

**EDUCATIONAL BACKGROUND**

Name and Address	Dates Attended	High School Graduated	Course or Major
Trade or Technical School _____		Yes No	
College _____		Yes No	
Other _____		Yes No	

**ACTIVIES**

Tell us about your recreational activities or hobbies: \_\_\_\_\_  
\_\_\_\_\_

**JOB RELATED SKILLS**

Welding _____	Dictation Equipment _____	Computer _____
Grinding _____	Receptionist _____	CRT _____
Heavy Equipment _____	Typing – Words per Minute _____	Programming _____
Truck Driving _____		
Steel Fabrication _____		
Machinery Operations _____		
Other _____		

Specify all equipment you are familiar with: \_\_\_\_\_  
\_\_\_\_\_

**PERSONAL REFERENCES (Excluding Former Employers or Relatives)**

Name and Occupation	Address	Daytime Phone Number
1. _____		
2. _____		
3. _____		

Please answer the questions marked below. The mark indicates that the information requested is a occupational requirement; a safety or security requirement; or otherwise legally permissible. If the box is not checked, you need not answer that question.

\_\_\_\_\_ Driver's License Do you have a current driver's license?  Number \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_ Military Service Branch served \_\_\_\_\_ Active Duty from \_\_\_\_\_ to \_\_\_\_\_  
Discharge Date \_\_\_\_\_ Discharge rank /grade \_\_\_\_\_  
Nature of Military Duties \_\_\_\_\_



**CERTIFICATE AND AGREEMENT**

I certify that all information contained in this application is truthful and accurate. I understand and agree that my falsehood, omission of neither information nor misrepresentation in this application or in any interview will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. I understand that just as I am free to resign at any time, the Employer's reserves the right to terminate my employment at any time, with or without cause, and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice. I hereby release from liability the Employer and its representative for seeking such information and all other persons, corporations, or organizations for furnishing such information.

I understand that Atchley Steel Company, Inc., is a drug free workplace and that I may be required as a condition of my employment to submit to periodic drug testing whether such testing is random or incident based in addition to Pre-Employment testing.

The Employer, Atchley Steel Company, Inc., is an Equal Opportunity Employer. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**DO NOT WRITE BELOW THIS LINE**

Date of initial Interview: \_\_\_\_\_

Conducted By: \_\_\_\_\_

Date of additional Interviews: \_\_\_\_\_

Conducted By: \_\_\_\_\_

Position offered: \_\_\_\_\_

Department: \_\_\_\_\_

Starting rate: \_\_\_\_\_ Schedule: \_\_\_\_\_

Date offered: \_\_\_\_\_

Employed by: \_\_\_\_\_

Approved By: \_\_\_\_\_

SSI Verification \_\_\_\_\_