1916 Picadilly Dr. Round Rock, TX 78664



Employment Application

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				Ар	piican	t Inform	ation								
Full Name:											Date:				
Last				Fi	First				M.I.						
Address:															
Street Address							Apartment/Unit #								
City								State ZIP Code							
Phone: ()) E-mail Address:							Zii Ç	Jouc					
Date Available: Desired Sal			alary:	ary: \$											
Position App	olied for:														
Are you a citizen of the United States?				YES	NO	If no, a	f no, are you authorized to work in the U.S.?						NO		
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	in:														
				Pre	evious	Employ	ment								
Company:								Phon	e: ()					
Address:						I	Superviso	r:							
Job Title:			(Starting Salary: \$				Er	nding Sa	lary:	\$				
Responsibili	ties:														
From:		To:		Reas	on for L	.eaving:									
Company:								Phon	e: ()					
Address:				Supe			Superviso	r:							
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Responsibili	ties:			1			I								
From:		To:		Reas	on for l	.eaving:									
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References									
Please list two professional references.									
Full Name:		Relationship:							
Company:			Phone:	()					
Address:	·								
Full Name:		Relationship:		, ,					
Company:			Phone:	()					
Address:									
Authorization									
I certify that the facts contained in									
that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize <u>Air Craft, Inc.</u> to investigate any and all statements contained herein and the references and employers listed above to give <u>Air Craft, Inc.</u> any information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release <u>Air Craft, Inc.</u> from all liability for any damages that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing, unless it is written and signed by an authorized company representative. This waiver does not permit the release or use of disability- related or medical information in a manner prohibited by the American with Disability Act (ADA) and other relevant federal state laws.									
Date: Signature:									
As a part of our hiring background and investigation, <u>Air Craft, Inc.</u> may obtain consumer reports to prepare and investigative consumer report. The investigative consumer report may consist of contacting all listed prior employers to verify your employment history. It may also include, but not limited to, credit information reports, criminal history reports and driving history records. Under the provision of the Fair Credit Reporting Act (15 USC at 1681-1681u) as amended, before <u>Air Craft, Inc.</u> can seek such reports, <u>Air Craft, Inc.</u> must have written permission to obtain the information. You have the right, upon written request, to complete and accurate disclosure of the nature and scope of the investigation. You are also entitled to a copy of your rights under the Fair Credit Reporting Act. These records shall be held in strict confidence and shall become part of your employment folder within the HR office of Air Craft, Inc. BY MY SIGNATURE BELOW, I AUTHORIZE AIR CRAFT, INC. TO OBTAIN RECORDS AND REPORTS AS									
STATED ABOVE.									
Signatura				Date:					
Signature: Hired:	Position & Dep	partment:		Date: Will Report:	Wages:				
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Approved: 1)2)3) Employment Manager Department Head General Manager									