



### **EMPLOYMENT APPLICATION**

PLEASE PRINT OR TYPE		Today's [	Date:	
First Name	MI	Last Name	Preferred	l Name/Nicknam
Street Address	?	City	State	Zip Cod
Phone	Alternate/ Phor	ne	Email Addres	ss
PLEASE PLACE A CHECK BY YOUR RI Are you interested in: Can you travel 6-8 weeks at a time?	ESPONSE OR PRO	VIDE THE APPROPRIA  Modification Technician Yes	Mapping Technician No	Office
How did you hear about us?	Walk In	Referral	Hiring Engine	Other:
Do you know anyone who works here	? Yes	Name: No	Where: Name:	
Do you have a valid driver's license	? Yes	No		
Can you pass a background check	? Yes	No		
Desired Pay: Hourly Pay (Minimum, if applicable)	\$	Annual Pay _	\$ Minimum	\$ Desired
When are you able to start work?	Date:			
re you authorized to work in the United	States?		Yes No	

Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, Western Technical will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.

Western Technical is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Western Technical complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. Western Technical also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.



# PO Box 1062 Wittmann, AZ 85361 928.501.9994

Are you capable of which you are appl	-		-	1?	Yes No		
PLEASE LIST YOU	R WORK EXPEI	RIENCE BELO	W (MOST RECE	NT JOB	FIRST)		
	COMPANY NAME			YOUR PO	OSITION and TITLE		
FROM	NO. & STREET			SUPERV	SUPERVISOR'S NAME, TITLE and POSITION		
Month / Year							
	CITY	STATE	ZIP CODE	SUPERV	ISOR'S TELEPHONE NUMBER		
	TYPE OF BUSINESS						
TO /	TELEPHONE NUME	BER	TERMINATION VOLUNTARY	/	REASON		
Month Year	involunt						
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	COMPANY NAME			YOUR PO	OSITION and TITLE		
FROM ,	NO. & STREET			SUPERV	ISOR'S NAME, TITLE and POSITION		
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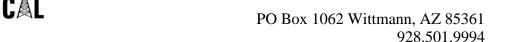
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## **EDUCATION:**

NAME AND ADDRESS OF SCHOOL		SUBJECT	GRADUATE?		DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP					
COLLEGE					
OTHER					
PROFESSIONAL DESIG	SNATIONS:	I			
DESIGNATION	ORGANI	ORGANIZATION GRANTING DESIGNATION			MPLETED
DESIGNATION	ORGANI	ORGANIZATION GRANTING DESIGNATION			MPLETED
PROFESSIONAL LICEN	ISES:				
TYPE OF LICENSE	STATE G	STATE GRANTING LICENSE			NUMBER

## **REFERENCES: Please list three professional references**

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE





I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

<u>Temporary/Contract Employment</u>: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED:	DATE:	