



# APPLICATION FOR EMPLOYMENT *Since 1952*

ESCO Manufacturing \* Stein Sign Display \* Elite Signs & Graphix

**An Equal Opportunity Employer      www.escomanufacturing.com      605-886-9668**

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

Present Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

Phone No. \_\_\_\_\_ Are you 18 years or older? Yes No

### Employment Desired

Position \_\_\_\_\_ Shift \_\_\_\_\_ Full-time, Part-time or Temp? \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If so, may we inquire of your present employer? \_\_\_\_\_

Ever applied to this company before? \_\_\_\_\_ Where? \_\_\_\_\_ When? \_\_\_\_\_

Education	Name & location of school	# Years attended	Graduate?	GPA
High School				
College				
Trade School				

### General

Subjects of special study or research work \_\_\_\_\_

US Military or Naval Service \_\_\_\_\_ Rank \_\_\_\_\_ Present members in National Guard or Reserves \_\_\_\_\_

### Physical Record

Any physical limitations that would preclude you from performing the work for which applied? Yes No

If yes, please describe: \_\_\_\_\_

Did anyone refer you to this position? \_\_\_\_\_ If yes, list referral source: \_\_\_\_\_

If employment offer is made, I would agree to a pre-employment drug screen Yes No

(Continued to other side)

**Former Employers** (List below your last four employers, starting with the last one first).

Date, Month, Year	Name of Business	Duties of Position	Salary	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				
From				
To				

**References** (Give the names of three persons not related to you, whom you have known at least one year).

Name	Address	Business	Phone Number	Email Address	Years Acquainted

I certify that the facts contained in this application are true and complete to the best of my knowledge and understanding and that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information that may be personal or otherwise, and release all parties from liability for any damage that may result from furnishing the same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time, without any prior notice.

**Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

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**Do Not Write Below This Line**

Interviewed by \_\_\_\_\_ Date: \_\_\_\_\_

Position \_\_\_\_\_ Hired \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Salary/Wage \_\_\_\_\_ Date Reporting to Work \_\_\_\_\_

Approved \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_