

LUCAS INDUSTRIES

Engineering, Tool Design, & Manufacturing



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE: _____

NAME: _____
LAST FIRST MI

PRESENT ADDRESS: _____
STREET CITY STATE ZIP

MAILING ADDRESS: _____
STREET CITY STATE ZIP

TELEPHONE NUMBER: _____

ARE YOU AT LEAST 18 YEARS OF AGE? YES NO

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED
IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES NO

EMPLOYMENT DESIRED

POSITION APPLYING FOR: _____ DATE THAT YOU CAN START: _____

SALARY DESIRED: _____ REFERRED BY: _____

HAVE YOU EVER APPLIED TO LUCAS BEFORE? YES NO IF SO, WHEN? _____

ARE YOU CURRENTLY EMPLOYED? YES NO IF SO, MAY WE INQUIRE OF
YOUR PRESENT EMPLOYER? YES NO

EDUCATION

HIGH SCHOOL ATTENDED: _____
NAME OF SCHOOL LOCATION

GRADUATE? YES NO IF NOT, NUMBER OF YEARS COMPLETED: _____

COLLEGE ATTENDED: _____
NAME OF SCHOOL LOCATION

SUBJECTS STUDIED: _____

GRADUATE? YES NO IF NOT, NUMBER OF YEARS COMPLETED: _____

PLEASE LIST ANY OTHER TRADE, BUSINESS OR CORRESPONDENCE SCHOOLS ATTENDED, DEGREES
RECEIVED, OR ANY OTHER APPLICABLE TRAINING COURSES, LICENSES OR FIELDS OF STUDY:

MILITARY SERVICE

US MILITARY OR NAVAL SERVICE:

RANK:

ARE YOU PRESENTLY A MEMBER OF THE NATIONAL GUARD OR RESERVES? YES NO **EMPLOYMENT HISTORY**

PLEASE LIST LAST THREE EMPLOYERS, STARTING WITH THE MOST CURRENT ONE FIRST

DATE (Month / Year)	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM:				
TO:				
FROM:				
TO:				
FROM:				
TO:				
FROM:				
TO:				

REFERENCES

PLEASE GIVE THE NAMES OF AT LEAST TWO PEOPLE (NOT RELATED TO YOU), THAT HAVE KNOWN YOU AT LEAST ONE YEAR.

NAME	ADDRESS (or current phone number)	BUSINESS	YEARS AQUAINTED

PLEASE READ THE STATEMENT BELOW AND SIGN UNDERNEATH:

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 MISINTERPRETATIONS 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 LUCAS INDUSTRIES' RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY LUCAS INDUSTRIES. I UNDERSTAND THAT NO REPRESENTATIVE OF LUCAS INDUSTRIES, OTHER THAN IT'S PRESIDENT AND/OR VICE PRESIDENT, AND ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT AND/OR VICE 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.

DATE:

SIGNATURE: