

PLEASE PRINT

Marine Master Trailers

Application for Employment

This company operates as a tobacco free environment and complies with the State of Tennessee Drug Free Workplace Policies.

Personal Information		Date	
Name (Last, First, MI)		Social Security No.	
Present Address		City	State
Telephone Number		Zip Code	

Employment Desired		
Position(s) Applied For	Date You Can Start	Salary Desired
Why would you like to work for this company?		

Education History			
Name & Location of School	Years Attended	Did you Graduate?	Subjects Studied
High School			
College			
Trade, Business or Correspondence School			

General Information	
Have you ever worked a production job? YES <input type="checkbox"/> NO <input type="checkbox"/>	May we contact your present employer? YES <input type="checkbox"/> NO <input type="checkbox"/>
Do you have a valid Tennessee Driver's License YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you available to work full time? YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you currently on "lay-off" status and subject to recall? YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you age 18 or over? YES <input type="checkbox"/> NO <input type="checkbox"/>
What is the best time to call you at home? AM / PM	
Are You Currently Employed? YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, why do you desire to change employment?

Is there anything else you would like us to know about you?

Present and Previous employers (Starting with most recent employer.)

Date - Month and Year	Name and Address of Employer	Salary	Position
FROM			
TO			
Duties		Supervisor	
Reason for leaving or seeking other employment			

Previous employer

Date - Month and Year	Name and Address of Employer	Salary	Position
FROM			
TO			
Duties		Supervisor	
Reason for leaving			

Previous employer

Date - Month and Year	Name and Address of Employer	Salary	Position
FROM			
TO			
Duties		Supervisor	
Reason for leaving			

Personal/Professional References

Name of three (3) personal references (not relatives or former employers) whom we may contact for a reference.

Name	Phone	Best time to call	Occupation

Applicant's Statement

I hereby authorize Marine Master Trailers to verify my present and previous employment information including salary as well as work ethics. Further, I authorize my current and former employers as well as references to provide information to Marine Master Trailers and I hereby release and hold harmless Marine Master Trailers and my current and former employers as well as other references who provide such information.

I certify that answers given herein are true and complete.

I hereby understand and acknowledge that, unless otherwise defined by law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date