



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE OF APPLICATION: _____

Name: _____
Last First MiddleAddress: _____
Street (Apt) City/State ZipAlternate Address: _____
Street City/State ZipContact Information: _____
Home Telephone Mobile Telephone Email***How did you learn about our company?*****POSITION SOUGHT:** _____ **Available Start Date:** _____**Desired Pay Range:** _____ **Are you currently employed?** _____
Hourly or Salary

EDUCATION

	Name and Location	Graduate? – Degree?	Major / Subjects of Study
High School			
College or University			
Specialized Training, Trade School, etc...			
Other Education			

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.

PREVIOUS EXPERIENCE

Please list beginning from most recent or provide a resume with this application

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

BACKGROUND

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

DO YOU HAVE A DRIVER'S LICENSE? Yes No

What is your means of transportation to work? _____

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

I hereby declare that all statements contained in this application are true and correct and understand that false or inaccurate information in the application will be the basis for termination. I hereby authorize Hufco to investigate my background and verify this information. I understand that if employed, my employment will not be for any fixed period of time and may be terminated by the company at any time. I also agree to submit to drug screen upon request or as specified in Hufco's substance abuse policy.

Signature of Applicant

Date Signed

Email completed application to jobs@hufco.com or fax to 713-460-1073. If you have a resume, please include it with your application.