

Air Control, Inc. Application for Employment

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion, and job status, without regard to race, color, religion, creed, sex, martial status, national origin, age, physical or mental disability.

Name: _____ Date of Application: _____
Last First Middle

Address: _____
Street (Apt) City/State Zip

Contact Information: _____
Home Telephone Mobile Telephone Email

State Identification Number: _____ Expiration Date: _____

1. General Information:

Are you able to perform the essential job functions of the position for which you are applying for or without reasonable accommodation? Yes No

Have you been convicted of any felonies other than minor traffic violations? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying) Yes No if Yes, Explain...

2. Education & Training

Circle the last grade completed – Grade 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Masters ___ Doctorate ___

Name And Address of School	Major Course study	Graduated or Degree (Y or N)	Average Grade
High School			
College or University			

Trade School, Specialized training, Etc.

List any scholarships, academic honors, awards, or special achievements:

3. Skills Please list areas of highest proficiency, special skills, or other items that may contribute to your abilities in performing the position you are applying for.

If required, will you work:

Rotating shifts Yes No Saturdays Yes No

Overtime Yes No Sundays Yes No

Willing to travel? Yes No

Position Sought: _____ Available Start Date: _____

Desired Pay Range: _____ Are you currently employed? _____

Hourly or Salary

State why you believe that you are qualified for this position. Include any significant experiences, interests, & accomplishments that may be useful in the position you are seeking.

4. Employment History

Starting with your PRESENT or MOST RECENT Employer, list in consecutive order all employment for at least the past three employers. If Currently employed, may we contact your employer? Yes No

PRESENT OR MOST RECENT EMPLOYER

FULL NAME OF COMPANY	(AREA CODE)	TELEPHONE	SALARY BEGIN END		EMPLOYED FROM TO MO/YR MO/YR	
STREET ADDRESS	CITY	STATE	ZIP			
NAME & TITLE OF SUPERVISOR	TITLE OF YOUR POSISTION		REASON FOR LEAVING:			
LIST JOBS HELD, DUITES PERFORMED, SKILLS USED, & PROMOTIONS WITH EMPLOYED AT THIS COMPANY						

FULL NAME OF COMPANY	(AREA CODE)	TELEPHONE	SALARY BEGIN END		EMPLOYED FROM TO MO/YR MO/YR	
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LIST JOBS HELD, DUITES PERFORMED, SKILLS USED, & PROMOTIONS WITH EMPLOYED AT THIS COMPANY						

READ CAREFULLY: I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in the denial of employment or discharge. I authorize the references listed above to give you any information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result in furnishing same to you.

Signature: _____ Date: _____