



An Equal Opportunity Employer

Employment Application

Personal Information

Date _____

Last Name _____ First Name _____ Middle Initial _____

Address _____ City _____ State _____ Zip _____

Phone Number (_____) _____ Email Address _____

Position Applying For _____ Desired Salary _____ Full Time _____ Part Time _____

Referred by _____ Date Available to Start _____

Are you currently employed? _____ Yes _____ No If so, may we contact your employer? _____ Yes _____ No

Are you eligible to work in the United States? _____ Yes _____ No Are you 18 years or older? _____ Yes _____ No

Do you have a valid driver's license? _____ Yes _____ No Do you have a CDL? _____ Yes _____ No Class _____

Have you ever been convicted of a felony within the last five years? _____ Yes _____ No

If yes, please explain _____

Have you ever been terminated by an employer? _____ Yes _____ No

If yes, please explain _____

Education

Type of School	Name & Location of School	# of Years Attended	Did you Graduate?	Major/Degree Earned
High School				
College or Trade School				
Other				

References (Please list two references other than relatives)

Name	Address	Phone #	Occupation/Position

Employment History (List most recent position first)

Employer _____ Job Title _____ Phone (____) _____

Employment Dates From _____ To _____ Reason for Leaving _____

Supervisor _____ May we contact supervisor for a reference ____ Yes ____ No

Responsibilities/Job Duties _____

Employer _____ Job Title _____ Phone (____) _____

Employment Dates From _____ To _____ Reason for Leaving _____

Supervisor _____ May we contact supervisor for a reference ____ Yes ____ No

Responsibilities/Job Duties _____

Employer _____ Job Title _____ Phone (____) _____

Employment Dates From _____ To _____ Reason for Leaving _____

Supervisor _____ May we contact supervisor for a reference ____ Yes ____ No

Responsibilities/Job Duties _____

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 misrepresentations 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 the policies of Fluid Pro, and I agree that my employment and compensation may be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by Fluid Pro.

Signature of Applicant _____ Date _____