



# APPLICATION FOR EMPLOYMENT

AVMATS • 18377 EDISON AVE • CHESTERFIELD, MO 63005 • 636-532-2674

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

PLEASE PRINT OR TYPE

<b>POSITION(S) APPLIED FOR</b> ONE OR MORE POSITIONS FOR WHICH YOU ARE APPLYING	<b>DATE OF APPLICATION</b>

**HOW DID YOU LEARN ABOUT US?**  
 ADVERTISEMENT    EMPLOYMENT AGENCY    FRIEND    RELATIVE    WALK-IN    OTHER \_\_\_\_\_

<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>MAIDEN NAME</b>	<b>LAST NAME</b>

<b>ADDRESS</b>	<b>NUMBER</b>	<b>STREET</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>

<b>EMAIL ADDRESS</b>	<b>PHONE NUMBER</b>	<b>ALTERNATE PHONE NUMBER</b>

If you are under 18 years of age, can you provide required proof of your eligibility to work? CHOOSE ONE  
Yes   No

Have you ever filed an application with us before? Yes   No  
 IF YES, WHEN DID YOU FILE AN APPLICATION WITH US? \_\_\_\_\_

Have you ever been employed with us before? Yes   No  
 IF YES, WHEN DID YOU STOP WORKING FOR US? \_\_\_\_\_

Are you currently employed? Yes   No

May we contact your present employer? Yes   No

Are you legally eligible for employment in the United States? Yes   No  
 PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT.

On what date would you be available for work? \_\_\_\_\_

Are you available to work:    Full Time    Part Time    Shift Work    Temporary

Are you subject to recall do to "lay-off"? Yes   No

Are you able to travel if required? Yes   No

Have you been convicted of a felony within the last 7 years? Yes   No  
 PLEASE EXPLAIN: \_\_\_\_\_

Have you ever had any job-related training in the United States Military? Yes   No  
 PLEASE DESCRIBE: \_\_\_\_\_

Are you able to perform the duties of the job for which you are applying? Yes   No

Are you multilingual? Yes   No  
 NATIVE LANGUAGE: \_\_\_\_\_ ADDITIONAL LANGUAGE(S): \_\_\_\_\_

List professional, trade, business or civic activities and offices held. YOU MAY EXCLUDE MEMBERSHIPS WHICH REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, ANCESTRY, HANDICAP OR OTHER PROTECTED STATUS.

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What is the highest educational degree you have received? \_\_\_\_\_

NAME AND LOCATION OF THE SCHOOL WHICH AWARDED YOUR HIGHEST DEGREE OR DIPLOMA

What is the focus of your degree or diploma? \_\_\_\_\_

Describe any honors you have received. \_\_\_\_\_

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Describe any specialized training, apprenticeship, skills, and extra-curricular activities.

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State any additional information you feel may be helpful to us in considering your application.

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Summarize job-related skills and qualifications acquired from employment or other experience.

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**REFERENCES**

PROVIDE TWO CHARACTER REFERENCES WHO ARE NOT RELATED TO YOU AND ARE NOT PREVIOUS EMPLOYERS

1.	_____	_____	_____
	FULL NAME	EMAIL ADDRESS	PHONE NUMBER
2.	_____	_____	_____
	FULL NAME	EMAIL ADDRESS	PHONE NUMBER

**EMPLOYMENT EXPERIENCE**

START WITH PRESENT OR LAST JOB. INCLUDE JOB-RELATED MILITARY SERVICE ASSIGNMENTS AND VOLUNTEER ACTIVITIES. YOU MAY EXCLUDE ORGANIZATIONS WHICH INDICATE RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, HANDICAP OR OTHER PROTECTED STATUS.

<b>EMPLOYER NAME</b>		<b>PHONE NUMBER</b>
<b>JOB TITLE</b>	<b>SUPERVISOR</b>	<b>WEBSITE</b>
<b>DATES EMPLOYED</b>		<b>WORK PERFORMED</b>
START DATE	END DATE	
<b>HOURLY RATE/SALARY</b>		
STARTING	ENDING	
<b>REASON FOR LEAVING</b>		

**EMPLOYMENT EXPERIENCE (CONTINUED)**

<b>EMPLOYER NAME</b>		<b>PHONE NUMBER</b>
<b>JOB TITLE</b>		<b>SUPERVISOR</b>
<b>WEBSITE</b>		
<b>DATES EMPLOYED</b>		<b>WORK PERFORMED</b>
START DATE	END DATE	
<b>HOURLY RATE/SALARY</b>		
STARTING	ENDING	
<b>REASON FOR LEAVING</b>		

<b>EMPLOYER NAME</b>		<b>PHONE NUMBER</b>
<b>JOB TITLE</b>		<b>SUPERVISOR</b>
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<b>DATES EMPLOYED</b>		<b>WORK PERFORMED</b>
START DATE	END DATE	
<b>HOURLY RATE/SALARY</b>		
STARTING	ENDING	
<b>REASON FOR LEAVING</b>		

**APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I also understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative background check including information as to my credit records, motor vehicle records, and character, general reputation, and personal characteristics. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable 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 Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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.

By submitting this for you agree to the "Applicant's Statements" as detailed on this form.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE