PROTECTION INCEST 11901 East 14th Avenue Aurora, Colorado 80010 office@arapahoefire.com Phone (303) 366-4905 Fax (303) 366-4966

APPLICATION FOR EMPLOYMENT

Date of application:	Date of Bi	rth
Name:		
First	Middle	Last
Present Address:		
	State:	
	Social Security No.	
Emergency Contact:		
Address:	State:Zip	
Address: City:		
Address: City:	State:Zip	

Position applying for:		Date you can start?
Are you currently O Yes O No	Have you ever O Yes When? Applied here before? O No	Are you in good standing O Yes With the Local 669 Union? O No
Dues paid through:	Union Card#:	Journeyman □ or Apprentice □ Class Grade: Rate:
Are you presently on lay of	f or leave of absence from another compan	? O Yes O No If Yes, explain here:
If employment is offered, can	you submit a birth certificate? O Yes 0 No	Can you submit a social security card, certificate of citizen ship or verification of your legal right to work? O Yes O No.

EDUCATION

Name and Location of school	•	Still Attendia	•	Cubicata atudiad
Name and Location of School	Attended		Graduate	Subjects studied
		O Yes	O Yes	
Elementary		O No	O No	
W. 1 G 1 1		O Yes	O Yes	
High School		O No	O No	
a "		O Yes	O Yes	
College		O No	O No	
Business or		O Yes	O Yes	
Trade School		O No	O No	

EMPLOYMENT HISTORY

Date Month and Year	Employer Name, Address and Phone	Salary	Position	Reason for leaving
From				
То				
From				
То				
From				
То				
From				
То				

REFERENCES

Name	Address and Phone	Business	Years Known
1.			
2.			
3.			

APPLICATION FOR EMPLOYMENT

U.S. Military or Naval Service:	Rank:
Any misrepresentation or falsification of discipline up to and including my dismiss. If my application for employment is accept employed, I agree to comply with and be My employment is not guaranteed for an reason. No management official is authorized to I authorize a thorough investigation of m from all liability or responsibility all personal I agree to any lawful drug testing that matesting during the course of my employment.	ne following. All information is subject to verification. formation requested here will be cause for rejection of this application or for subseque from employment. d, the effective date of my employment shall be the time I actually begin to work. If I an bund by the Safety and Health rules and regulations of the company. erm, and that my employment may be terminated by the company or myself for any ake any assurance or promise of continued employment. past employment and activities, agree to cooperate in such investigation, and release as and corporations requesting or supplying such information. be required as a condition of employment and understand that refusal to submit to such that may result in disciplinary action, up to and including discharge. Il individuals who are hired must, as a condition of employment, produce certain
documentation to verify their identity and	S. citizen status, or, if aliens, their legal authorization to work in the U.S. Therefore, I be contingent upon my ability to produce the required documentation within the time per
documentation to verify their identity and realize that any offer of employment would required by law.	S. citizen status, or, if aliens, their legal authorization to work in the U.S. Therefore, I
documentation to verify their identity and realize that any offer of employment woul required by law. Signature of applicant:	S. citizen status, or, if aliens, their legal authorization to work in the U.S. Therefore, I be contingent upon my ability to produce the required documentation within the time per
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documentation to verify their identity and realize that any offer of employment would required by law. Signature of applicant: Below	S. citizen status, or, if aliens, their legal authorization to work in the U.S. Therefore, I be contingent upon my ability to produce the required documentation within the time per Date :
documentation to verify their identity and realize that any offer of employment woul required by law. Signature of applicant: Below Remarks:	S. citizen status, or, if aliens, their legal authorization to work in the U.S. Therefore, I be contingent upon my ability to produce the required documentation within the time per
documentation to verify their identity and realize that any offer of employment would required by law. Signature of applicant: Below	S. citizen status, or, if aliens, their legal authorization to work in the U.S. Therefore, I be contingent upon my ability to produce the required documentation within the time per Date :

This company will not discriminate against any employment because of age, religion, sex, race, color, national origin, disability, non-job related handicap, or because they are a disabled veteran or Vietnam veteran. Answers to application questions will be utilized for applicable, job related information only.