



All FAB Precision Sheetmetal, Inc.
 1015 Timothy Drive
 San Jose, CA 95133

tel: 408 279-1099
 fax: 408 297-3803

APPLICATION FOR EMPLOYMENT

Date:

Personal Information:

Name (First, Middle, Last):		SSN:
Address:		
City:	State:	Zip:
Home Phone:	Mobile Phone:	

Job Information:

Position Desired:	Date Available:
Availability (check one): Reg FT <input type="checkbox"/> Reg PT <input type="checkbox"/> Temp FT <input type="checkbox"/> Temp PT <input type="checkbox"/>	
Have you applied here before? If yes:	Date Applied: Position:
Have you worked here before? If yes:	Period Worked: Position:

Do you know anyone who has worked or is currently working here?

Name (s): _____ Relationship (s): _____

How did you hear about us? (Circle One) **Employee Referral** Mercury News Monster.com Craigslist Walk-in

Education:

Institution	Name and Address	Graduated?		Degree (s)	GPA
		Yes	No		
High School					
College					
University					
Other					

Experience:

Date	Name, Address and Phone # of Employer	Salary	Position	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				

May we contact your current or past employer (s)?

Other Information:

Subjects of special study or research work:

Special Training:

Activities (volunteer, athletic, etc.):

Exclude any organization for which its name may indicate the race, creed, sex, marital status, age, color, or national origin of its members.

References: Give the names of three persons not related to you, whom you have known for at least one year.

Name	Address	Phone #	Relationship	Year(s)
1				
2				
3				

In case of an emergency, please notify: _____

Address: _____ Phone: _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, at the discretion of the employer, be terminated at any time without any previous notice.

Applicant Signature: _____ Date: _____

Office Use Only			
Interviewed By:		Date:	
Remarks:			
Neatness:			
Ability:			
Hire Date:	Start Date:	Salary/Hourly Wage:	
Department:	Position:	Shift:	
Availability (check one):	Reg FT ___	Reg PT ___	Temp FT___ Temp PT___
_____ Supervisor	_____ Dept. Manager	_____ HR Manager	_____ VP of Operations