

EXP FABRICATION, LLC

9435 SWAFFORD ROAD
JUSTIN, TEXAS 76247

Phone: 940-300-6933
Fax: 940-293-1408

Job Application

Personal Information

Last		First	MI	SSN#	Email	
Street Address		City	ST	Zip	Home Phone	Mobile Phone
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, Date of Birth	
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please explain:			
Do you have a valid Driver's License and/or dependable transportation to and from work? <input type="checkbox"/> Yes <input type="checkbox"/> No			If No, please explain:			
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No		Branch		Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No		War
What position are you applying for?			How did you hear about this position?			
Expected Hourly Rate		Expected Weekly Earnings		Date Available		

Prior Work Experience

	Current or Most Recent		Prior		Prior	
Employer						
Address						
City, ST, ZIP						
Telephone						
Name of Immediate Supervisor						
Dates of Employment	From	To	From	To	From	To
Position/Job Title						
Pay						
Reason for Leaving						
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Education

Name/Location	Last Year Complete	Degree	Major or Emphasis
High School	9 10 11 12		
College/University	1 2 3 4		
Trade School			
Other			
List any applicable special skills, training or proficiencies.			

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.

Signature

Date