



Application for Employment

Hawk Enterprises Inc., considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, sexual orientation, or any other legally protected status. Hawk, is an Equal Opportunity Employer.

Position applied for: _____

Date of this application: _____

Social Security Number: _____

Name: _____

Address: _____

Street

City State Zip Code County

Cell phone: _____

Email: _____

Date of Birth: _____

Drivers License #: _____ Expiration: _____ State _____

Marital Status: _____

Emergency Contact: _____

Telephone Relationship

The following information is required for a Bona Fide Occupational Qualification (BFOQ), or dictated by the national security laws, or is needed for other legally permissible reasons:

Please circle one:

- 1. Are you below the age of 18? Yes No
- 2. Have you ever filed an application with our company before? Yes No
- 3. Are you currently employed? Yes No
- 4. May we contact your previous employer? Yes No
- 5. Are you prevented from becoming lawfully employed in this country because of Visa or immigration status? Yes No
- 6. On what date are you available for work? _____
- 7. Are you available to work full time? Yes No
- 8. Are you currently on layoff status? Yes No
If yes, are you subject to recall? Yes No
- 9. If the job requires it, will you travel? Yes No
- 10. Have you been convicted of all felony within the last 7 years? Yes No
If yes, please explain: _____

*You will not be denied employment solely because of conviction record, unless the offence is related to the job for which you have applied.

- 11. Do you have a valid driver's license? Yes No
If yes, what type? _____
- 12. If you have a Commercial Driver's License (CDL) have you:
Completed a NIDA DOT drug screen within the last 6 months? Yes No
Completed a DOT medical exam within the last 2 years? Yes No
- 13. List salary/ pay rate desired: _____
- 14. Are you currently, or have you ever been in the U.S. military or Naval Service? Yes No
- 15. Are you a Veteran? Yes No
- 16. Do you have any job-specific special qualifications or certifications such as an OSHA card, or equipment certification? Yes No
If yes, please explain:

Education

Grammar School Name & location: _____

Years attended: _____

Did you graduate? Yes No

High School Name & location: _____

Years attended: _____

Did you graduate? Yes No

College Name & location: _____

Years attended: _____

Did you graduate? Yes No

The Age Discrimination in Employment Act prohibits discrimination on the basis of age with respect to individuals who are 40 years of age or older

Employment History & References

List your last 3 **employers**, starting with the most recent.

Employer #1:

Dates employed: From: _____ To: _____

Business name & address: _____

Position: _____ Salary/ Rate: _____

Reason for leaving: _____

Employer #2:

Dates employed: From: _____ To: _____

Business name & address: _____

Position: _____ Salary/ Rate: _____

Reason for leaving: _____

Employer #3:

Dates employed: From: _____ To: _____

Business name & address: _____

Position: _____ Salary/ Rate: _____

Reason for leaving: _____

List the names of 3 persons, to whom you are not related, and whom you have known for 1 year:

Name & Phone: _____

Relationship: _____

Years acquainted: _____

Name & Phone: _____

Relationship: _____

Years acquainted: _____

Name & Phone: _____

Relationship: _____

Years acquainted: _____

I certify that the 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 in an employment decision.

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 point must inquire as to whether or not applications are being accepted at this 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 employment 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, conduct, or words, unless such change is specifically acknowledged in writing by an 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.

Applicant Signature

Date

EEO Information

Applicant Name (print)

Date of Application

The following information is required by the Federal Government in order to monitor the employers compliance with equal employment opportunity.

You are not required to furnish this information. However, if you choose not to furnish the information, the employer is required to note race and sex on the basis of visual observation or surname.

I do not wish to provide this information

Sex:

- Female
- Male

Race/ National Origin:

- American Indian/ Alaskan Native
- Asian/ Pacific Islander
- Black
- Hispanic
- White
- Other _____