

PRE-EMPLOYMENT APPLICATION



Python Corporation CONCRETE RESTORATION/PROTECTION SPECIALISTS



www.pythoncorp.com

PRE-EMPLOYMENT APPLICATIOON

Our company is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability as provided in the American's With Disabilities Act.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered.

Name			Home Phor	ne
Present Address			E-mai	*
Are you ever 192	Voc	No		
Are you over 18?	res	NO		
Are you a citizen of the United States?	f the U.S.,	or do you hav	e the legal ri	ght to be employed in
Yes	No			
Have you ever bee including DWI?	n convicted	d of any crime	e (excluding m	ninor traffic violations)
Yes	No			
If yes, state	e the offens	se, location, c	late and dispo	sition
Would you be willir	ng to reloca	ate?	Yes	No
Driver's License:	State:	-	Гуре:	#:

Yes

No

Currently Valid?

EMPLOYMENT DESIRED

1.	Are you	Seeking	Full Time	Part Tim	ne
			Temporary	Summe	r Employment
2.	Position	applied for			
3.	Salary D	esired			
4.	Available	e to start			
5.	Have yo	u ever appli	ed to our company b	efore Yes	No
6.	Have yo	u ever work	ed for our company	before Yes	No
	•		ther of the above qu and/or worked.	estions Yes, sta	te when and
7.	How did	you learn of	our company and/o	r position?	
8.	Are you	now, or do y	ou expect to be, wo	rking in any oth	er business or
	job?	Yes	No		
9.	Are there	e any days o	r hours you would be	e unable or unw	villing to work?
	Yes	No			
	If Yes, p	ease specify	those days or hours	5.	
MII	LITARY				
10.	Have you	ı ever serve	d in the military ?	Yes	No
Se	rvice Bran	ch	Date E	ntered	
Da	ite Separal	ted	Final R	ank	
Ту	pe of Discl	narge			

EDUCATION

11. Name, Address and Location

High School	From:	Graduate	Diploma	
_		Yes	Yes	
	To:	No	No	
College	From:	Graduate	Diploma	
	To	Yes	Yes	
	To:	No	No	
Course(s) Studied:				
Trade School	From:	Graduate	Diploma	
	To:	Yes	Yes	
	10.	No	No	
Course(s) Studied:				

- 12. If you did not graduate, why did you leave high school or college?
- 13. Are you planning to pursue further studies? Yes No If so, when, where and what courses?
- 14. List any scholastic honors, offices held and activities involved in during high school and college.
- 15. List any describe other School or Specialized Training?

CAPABILITY / RELIABILITY

16.	Would you be willing and able to perform all of the tasks required by the job you are applying for?					
	Yes No					
	If no, Please Explain					
17.	or past employers? Yes No	lent claim against any of your present				
	If Yes, please explain					
18.	Will you abide by the safety rules	of this company? Yes No				
19.	Have you ever been disciplined for regulations? Yes No	r violating company safety rules or				
	If Yes, Please explain					
20.	How many days of work (or school years?	ol) have you missed in the last two				
21.	How many times have you been I two years?	ate for work (or school) in the last				
22.	Would you be willing & able to wo	rk on time every day on a regular &				
	consistent basis? Yes	No				
	If No, please explain					

WORK HISTORY

23. List names of employers in consecutive order with present or last employer first. Account for all periods of time, including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

(PLEASE GIVE MONTH AND YEAR/DO NOT REFERENCE YOUR RESUME)

•					
NAME AND ADDR OF EMPLOYER					
EMPLOYER CONTACT		DATES	EMPLOYED	PA	Y
	Fr	om:	<u>To:</u>	Start:\$	
EMPLOYER CONTACT PHONE #	Mont	h:	Month:	Ending:\$	
THORE #	Year:		Year:		
NATURE OF BUSIN	NESS				
JOB TITLE					
NAME AND TITLE OF LAST SUPERVISOR					
REASON FOR LEA	VING	:			
DUTIES:					

NAME AND ADDRES OF EMPLOYER	S		
EMPLOYER CONTACT	D	ATES EMPLOYED	PAY
	Fror	<u>m:</u> <u>To</u> :	Start:\$
EMPLOYER CONTACT PHONE #	Month	Month	Ending:\$
riione #	Year	Year	
NATURE OF BUSINES	SS		
JOB TITLE			
NAME AND TITLE OF LAST SUPERVISOR			
REASON FOR LEAVIN	G:		
DUTIES:			

SUPPLEMENTAL EMPLOYMENT INFORMATION:

- 24. If you worked in any of your previous positions under another name, please give that name(s)
- 25. Are you presently employed? Yes No

 If Yes, may we contact your present employer? Yes No
- 26. Have you ever been fired, or asked to resign, from a job? Yes No If Yes, please explain

SPECIAL SKILLS:

- 27. Do you type? Yes No Words per minute
- 28. Have you had any computer or word processing experience or training? Yes No

If Yes, please describe

- 29. What language do you speak fluently?
- 30. Use this space below to describe why you are interested in working for our company and list those skills and abilities which you feel particularly qualify you for a position with us.

REFERENCES

31. Give three (3) references, not relatives or former employees.

NAME	ADDRESS	PHONE	OCCUPATION

AUTHORIZATION TO OBTAIN INFORMATION PRIVACY ACT STATEMENT AND RELEASE

To Whom It May Concern:

This authorization and release, or photocopy hereof, is unlimited as to time. I authorize and release you to furnish any and all information to **Python Corporation; P.O. Box 790; Lacombe, LA 70445** and/or their agents. Regarding my character, health, wealth, finances, civil and criminal suits, credit, medical records, birth records, state and federal records, accident reports, personal records, pre-employment records and/or any other information that might be necessary for **Python Corporation** and/or their agents to complete their investigation.

SIGNATURE DATE

ADDRESS SOCIAL SECURITY #

CITY, STATE & ZIP CODE DATE OF BIRTH

AFFIDAVIT

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge.

Ι hereby authorize the Company to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.

I agree that, if I am employed, I will abide by all the rules and regulations of the company. I understand that the taking of drug and alcohol testes, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody in the company is authorized to enter into any written or verbal employment contracts with me for any definite period of time without the express written consent of the President of the Company. I also understand that my employment is "at-will" and may be terminated by myself or by the company at any time for any reason at all, with or without prior notice.

SIGNATURE DATE

COMPANY USE ONLY

Interviewed By:

Interviewers remarks:

Is the operation of a company vehicle a job requirement? γ_{es} No

If yes to above, has a request for driver's record been γ_{es} No

made?