



HENRY WURST

INCORPORATED

East Region
Lufkin Rd.
Apex, NC 27502
(919) 362-8831

West Region
5000 Osage Street, Suite 100
Denver, CO 80221
(303) 427-0282

Central Region
1331 Saline St.
North Kansas City, MO 64116
(816) 842-3113

APPLICATION FOR EMPLOYMENT AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

Name _____
Last First Middle

Social Security Number: _____ Phone Number: _____

Present Address: _____
Street City State Zip

How long have you lived at the above address? _____

For reference purposes - If you have ever used another name, state name and dates:

EMPLOYMENT DESIRED

In making this application for employment, I understand that this particular application is for the below listed position only, and in no event will it be considered ACTIVE for any longer than 30 days.

Position _____ Date you can start: _____ Salary desired: _____

Have you ever been employed by us? _____ If yes, when and where: _____

Are you employed now? _____ Are you interested in Full-Time? Part-Time? Nights? Overtime?

State the days or times which you **cannot** work: _____

If you are interested in Part-Time, specify the time(s) available: _____

EDUCATION	Name & Location	# of Years Attended	Diploma or Degree	Subjects Studied
High school	_____	_____	_____	_____
	_____	_____	_____	_____
College	_____	_____	_____	_____
	_____	_____	_____	_____
Trade, Business, or Correspondence Schools	_____	_____	_____	_____
	_____	_____	_____	_____

List machines or equipment you can operate: _____

List any special skills: _____

In the past five years, have you been convicted of a felony? _____ If yes, describe in full below (will not necessarily exclude you from consideration)

List any friends or relatives working for us, and give their relationship to you: _____

If the job required that you wear safety shoes, would you be able to purchase them before going to work? _____
(The company will reimburse you for a portion of the cost.)

Were you in the U.S. Armed Forces: Yes No If yes, what branch? _____

Dates of duty: From: _____ To: _____ Rank at discharge: _____
Month Day Year Month Day Year

FORMER EMPLOYERS (List below last six employers, starting with last one first)

From MM/YY	To MM/YY	Name, Address & Phone # of Employer	Salary	Position	Reason for leaving	Supervisor's Name & Phone

May we contact your present employer? Yes No

Are there any other experiences, skills, or qualifications which you feel would especially fit you to work for this company?_____

REFERENCES - Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Phone #	Years Acquainted
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

CONDITIONS:

I authorize the company to verify all statements contained in this application for employment and to make reference and background checks as its representatives deem necessary except as limited above for present employer. You are hereby authorized to make any investigation of my personal or employment history, and my financial and credit record through any investigative consumer agencies or bureaus of your choice. I also understand that an investigative consumer report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.

I understand that employment is contingent upon complying with the employment verification requirements of the Immigration Control and Reform Act.

I certify that all of the statements I have made and all information provided in this application are true, and agree that my misrepresentation or omission of facts called for may result in cancellation of my application for employment or immediate dismissal. In consideration of my employment, I agree to conform to the rules and regulations of the company, and I understand that if I am employed by the company that my employment, regardless of the manner or duration of my compensation, will be for no definite term, and my employment and compensation can be terminated, with or with cause, and with or without notice at any time, for any reason, at the option of the company. I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to foregoing.

Signature of applicant

Date