

Technical Industries Group of Companies

15438 Miller Road 1, Lot A	Tel: 281-862-2800 Fax: 281-862-2828						
Houston, Texas 77049							
Tel: 281-862-2800 Fax: 281-862-0030	Application For Employment						
	EQUAL OPPORTUN	ITY EMPLOYER					
):						
Personal		D.O.B	1				
Name							
Street							
City		Home Phone					
State		Business Phone					
Zip		Fax					
Education							
Name And Location	From	То	Date Graduated	Degree/Major/GPA			
High School							
College							
Other							
Special Skills or Training							
Employment History (Start with most De	oont)						
Employment History (Start with most Reference To	cent)	Employer Name		Phone			
From To Job Title		Employer Name		Priorie			
Supervisor's Name		Duties					
Starting Salary		Duties					
Ending Salary	Ending Salary			Reason for Leaving			
We may verify with previous employer (Do you agree?				No			
Employment History							
From To		Employer Name		Phone			
Job Title	o Title						
Supervisor's Name		Duties					
Starting Salary							
Ending Salary	Reason for Leaving						
We may verify with previous employer (Do you agree?) Yes	No					
Employment History							
From To		Employe Name		Phone			
Job Title							
Supervisor's Name		Duties					
Starting Salary		Dance for Lander					
Ending Salary We may verify with previous employer (Do you agree?) Voc	Reason for Leaving					
vve may verily with previous employer (Do you agree?) Yes	No					
Applicants Signature Print	Name		Date				
			-				

Military									
Branch	Rank	Duties	From	То	Salary	Reason for Change in Rank			
	<u> </u>								
ADDITIONAL DATA									
Position Appied For:	Full Time		Part Time		Temporary:				
Schedule Desired:									
List Any Day/Hours You Are Unable To Work:									
Rate Of Pay Desired:									
How Did You Hear About	This Job:								
Have You Worked Here I	Before?		Yes		No				
If Yes, How Long?									
Previous Position:			Reason For Leav	ving:					
List Any Friends Or Relat	tives Workin	g With Us Now:							
PERSONAL REFERENC	ES								
Name		Address		Relasionship		Phone			
LIST ANY PERSON WE	MAY CONT	ACT (Be sre to i	include phone num	nber)					
APPLICANT: Do you have a condition, or a reason that may prevent you from performing you job? YesNo Read and Sign Below. The job you are applying for may require you to work overtime, and multitasking positions, or may require you to be on call when required by your supervisor, do you hereby agree to work as required by Technical Industries, Inc.? Yes No If Technical Industries, Inc. pays for an employee to attend classes, certifications, and any training programs, the employee must serve no less then 12 months after attending each class in order for Technical Industries, Inc., to recover it's investment. If the employee chooses to leave before serving the 12 months, the employee hereby agrees to pay for each training course, class or certification. By signing this application, the applicant hereby understands and submits to Technical Industries Inc. employment policies and procedures, which include extensive back round checks, including but not limited to employment, credit, and criminal history. The information provided by me in this application for employment is true and complete to the best of my knowledge. Technical Industries, Inc., may require more information, and I hereby promise to provide all information needed. I understand that if I am employed, any false statement will be considered as cause for possible dismissal.									
APPLICAN SIGNATURE				DATE:		_			

Comments

INTERVIEW: Interviewer

Date