

DATE: _____

PERSONAL INFORMATION

NAME: _____
LAST FIRST MIDDLE

SOCIAL SECURITY #: _____

PRESENT ADDRESS: _____

EMAIL ADDRESS: _____

HOME PHONE#: _____ CELL PHONE#: _____

DO YOU HAVE A VALID DRIVERS LICENSE? Y N

ARE YOU PREVENTED FROM LAWFULLY BECOMING

LICENSE #: _____ EXP.: _____

EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR

IMMIGRATION STATUS? Y N

ARE YOU WILLING TO TRAVEL IF JOB REQUIRES IT?

ARE YOU 18 YEARS OR OLDER? Y N

Y N

HOW DID YOU HEAR ABOUT
WATERLINE INDUSTRIES?

WERE YOU REFERRED BY _____

ANYONE?

HAVE YOU EVER BEEN INTERVIEWED OR PREVIOUSLY EMPLOYED BY WATERLINE INDUSTRIES? Y N

IF YES, LIST DATE(S), JOB TITLE(S) AND LOCATION(S) _____

ARE YOU CURRENTLY EMPLOYED?

IF YES, MAY WATERLINE INQUIRE WITH YOUR CURRENT

Y N

EMPLOYER? Y N

REFERENCES: PLEASE PROVIDE THE NAMES AND PHONE NUMBERS OF THREE PERSONS (NON-RELATIVE):

NAME:	COMPANY	RELATIONSHIP (I.E. CO-WORKER)	PHONE	YRS ACQUAINTED

EDUCATION

SCHOOL NAME/LOCATION:	# OF YRS ATTENDED	DID YOU GRADUATE: Y / N	MAJOR STUDIES
HIGH SCHOOL			
COLLEGE/UNIVERSITY			
VOCATIONAL, BUSINESS, OTHER			

LIST ANY PROFESSIONAL DESIGNATIONS:

US MILITARY/
NAVAL SERVICE

RANK: _____

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

ADDT'L NOTABLE SKILLS, QUALIFICATIONS:
ACTIVITIES (CIVIC, ATHLETIC, ETC.)



EMPLOYMENT HISTORY

LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT POSITION. ALL INFORMATION **MUST** BE COMPLETED. **YOU MAY ATTACH A RESUME, BUT NOT IN PLACE OF COMPLETING THE REQUIRED INFORMATION**

EMPLOYER/ADDRESS/PHONE	POSITION/SALARY	DATES EMPLOYED	REASON FOR LEAVING? WHAT DID YOU LIKE MOST ABOUT THIS POSITION?

APPLICANT SIGNATURE:

SIGNED ON THIS DATE:

ATTACHMENT: Disclosure and Consent for Background Release



ADDENDUM TO WATERLINE INDUSTRIES CORPORATION

EMPLOYMENT APPLICATION SCREENING AUTHORIZATION

1. I certify that I have never been convicted of a criminal offense. Further, I certify that I have never been convicted for any offense involving sexual misconduct or moral turpitude.
2. I certify that the facts contained in this application are true and complete to the best of my knowledge and belief. I acknowledge and understand that Waterline Industries, Corp. WILL BE RELYING ON the information contained in this application and that the information is complete and accurate. I further understand and agree that, if employed, any falsified statements or any material half-truths, material misstatements or omissions on this application, without full disclosure of all relevant facts, shall be grounds for Waterline Industries, Corp. to immediately VOID any employment contract with me, and shall be grounds for my immediate dismissal from employment with Waterline Industries Corporation.
3. I hereby authorize without reservation, any party or agency contacted by WIC and its administrators to fully investigate all statements contained herein. Further, I authorize all references listed and all previous employers to give Waterline Industries, Corp. any pertinent information they may have, personal or otherwise, relative to me and/or my employment. I hereby release all parties from any and all liability for damages I may claim to suffer as a result of their furnishing such information to Waterline Industries Corporation representatives.
4. I understand that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that effect is executed by the employer and employee in writing.
5. In the event I am employed, I realize that I am required to abide by all rules and regulations of the employer.

APPLICANT SIGNATURE:

SIGNED ON THIS DATE:



WATERLINE INDUSTRIES EMPLOYMENT PROCESS

No person shall be considered for employment until such time as a **complete** application is received, reviewed, and accepted.

A complete application is required for **all** positions and includes the following:

1. Resume (as requested for specific position).
2. Written reference verification(s). (Professional references must be position specific.)
3. Licensure or certification verification where applicable
4. Skill tests or work sampling (as required for specific positions).
5. An offer of employment is contingent upon the following: receipt of satisfactory references; sanction check to verify you have not been excluded from federal health insurance programs; and verification of professional licensure or certification, if applicable.
6. Satisfactory completion of a physical exam is necessary to assess whether an employee has the physical capabilities to perform the essential functions of the job to which he/she will be assigned and what accommodation, if any, may be needed. Drug and alcohol testing may also be necessary as required for specific positions.
7. If additional medical evaluation is indicated, the employee will not be permitted to begin work until an occupational health physician has completed his/her assessment. In some cases, additional tests – such as physical capacity evaluations– may be required. Every effort will be made to accomplish a timely resolution, however; a timeframe of approximately two (2) weeks or more may be necessary if additional test and/or information are required.
8. The new employee is permitted to begin work only after all the above requirements have been met.

APPLICANT SIGNATURE:

SIGNED ON THIS DATE: