

APPLICATION FOR EMPLOYMENT

Savage Stone, LLC

PO Box 850

Laurel, Maryland 20725

301-953-7650

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status or any other legally protected status

<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>

<i>Address Number</i>	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

<i>Telephone Number(s)</i>	<i>Social Security Number (Voluntary)</i>

Position Applied For: _____ **Shift Preferred:** 1st 2nd 3rd Any

Have you ever been employed by us before? Yes No
If Yes, give Dates _____

Do any friends or relatives work here? Yes No
If Yes, state name and relationship _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Do you have a legal right to be employed in the US? (proof required upon employment) Yes No

Have you ever been convicted of a crime? Yes No
If yes, explain _____

Have you ever filed a Worker's Compensation Claim? Yes No
If yes, explain _____

Date available for work ____/____/____ **What is your desired wage?** _____

List the Types of Equipment you can operate _____

PERSONAL/PROFESSIONAL REFERENCES				
Name	Phone Number	Relationship	Best Time to Call	Occupation

EDUCATION				
Name and Location of School		Years Attended	No of Years Completed	Diploma/Degree
High School				
College				
Trade/Business				

EMPLOYMENT HISTORY AND WORK EXPERIENCE

Dates Employed	Employer Name And Address	Position	Supervisor Name Company Phone	Wages	May we contact the Employer?	Reason for Leaving
From					YES	
To					NO	
From					YES	
To					NO	
From					YES	
To					NO	
From					YES	
To					NO	

MILITARY

Branch	Position	From	To	Duties

SPECIALIZED SKILLS

Equipment Operator: *List Types and Years Experience*

Maintenance/Mechanical: *List Skills and Years Experience*

Plant Operation: *List Types and Years Experience*

Languages: *List Types and Level of Experience*

Other: *Specify*

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. Are you capable of performing in a reasonable manner, the activities involved in the job for which you have applied? A review of the activities required by the job you have applied for has been provided. Yes No

APPLICANT'S STATEMENT

I hereby certify that I have supplied true and complete information to the above questions to the best of my knowledge and understanding. I understand that any misrepresentation or falsification of information on this application may result in refusal or separation from employment. I consent and authorize the investigation of all statements herein; references, and employers listed above to provide you with pertinent information concerning my previous employment, education, and related background.

This application shall be considered active for a period not to exceed 45 days.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the organization is of an "at will" nature, which means the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause, and may only be changed in writing by an authorized executive of this Company.

_____ Signature of Applicant	_____ Date
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