

### **APPLICATION FOR EMPLOYMENT**

An Equal Opportunity Employer- All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national orgin, disability status, protected veteran status, or any other characteristic protected by law.

INSTRUCTIONS: All questions on this application form must be answered in order to evaluate your qualifications for employment. A false or misleading response on the application or in the interview process may result in disqualification for employment or if discovered after employment, termination of employment.

#### **EMPLOYMENT DESIRED:**

Position Applying for:	Date Availa	ole:	Desire	d Salary:
Employment Type: Full-time	Part-time		Summer	Temporary
Are you eligible to work in the U.S.?	Yes	No	-	
Have you ever been employed by PNA	/API before? Yes	No	_ If Yes, when?	
Referred by:		-		

#### PERSONAL INFORMATION:

	LAST	FIRST	M.I.		SOCIAL SECURITY #
Address:	STREET	CITY	STATE	ZIP	PHONE
Have you u	sed any names or Social S	Security other than the given al	oove? Yes	No If Yes	, please list below:
	een convicted of a crime disqualify an applicant fo	in the past 7 years? Yes or employment.)	No	If Yes, please exp	plain (conviction will not

#### **EDUCATION & TRAINING:**

High School:				
	NAME	COMPLETE ADDRESS	GRADUATE	DEGREE
College:				
-	NAME	COMPLETE ADDRESS	GRADUATE	DEGREE
Other:				
	NAME	COMPLETE ADDRESS	GRADUATE	DEGREE
List any other Education, Training, Special Skills, or Certificated/Licenses (CDL, etc) that you possess related to this job:				

List any machines or equipment that you are qualified and experienced at operating: (i.e., computer, forklift etc.):

Languages in which you are fluent: \_\_\_\_\_\_

If a job requires a valid driver's license, please provide the following: Name on license:

License No: \_\_\_\_\_ Type: \_\_\_\_\_ State Issuing License: \_\_\_\_



#### **EMPLOYMENT HISTORY**(List the three most recent employers beginning with the present employer)

#### 1. Present or Last Employer:

Company	Name/Address	City	State	Phone Number
From: _	То:			
	Dates Employed	Your Title	Name & Titl	e of Supervisor
Brief descr	ription of duties			
Salary	/(Hourly, Weekly, Monthly)		Reason for leaving	
. Previ	ous Employer:			
Company	Name/Address	City	State	Phone Number
From:	To:			
	Dates Employed	Your Title	Name & Titl	e of Supervisor
Brief desc	ription of duties			
Salary	/(Hourly, Weekly, Monthly)		Reason for leaving	
. Previ	ous Employer:			
Company	Name/Address	City	State	Phone Number
From:	To:			
	Dates Employed	Your Title		e of Supervisor
Brief desc	ription of duties			
Salary	/(Hourly, Weekly, Monthly)		Reason for leaving	

	Name	Address/Phone	Occupation	Years Known
1				
2				
3				

#### **APPLICANT'S CERTIFICATION and RELEASE:** PLEASE READ CAREFULLY BEFORE SIGNING.

I certify that, to the best of my knowledge and belief, the answers given by me to the foregoing questions and the statements made by me are complete and true. I understand that any false information or misrepresentations of facts called for in this application may result in rejection of my application or discharge at any time during my employment. I authorize Petroflex NA and/or its agents to make inquiries to verify any of the information given in this application. I authorize all former employees, persons, schools, companies, and law enforcement authorities to release any information concerning my background and I hereby release such persons, schools, companies and law enforcement authorities which they represent from any liability or any damages whatsoever for issuing such information. This is not an employment contract. All employment is "at will" and the relationship cannot be modified unless in writing.

Date: \_\_\_\_

Signature :\_

## **Training Only Industrial Skills Profile**

Code

MANU ASSEM

PRECIS

STRUCT ELECT

ELECT

SOLD

CCSOLD

SCHEM

PCS

QC

QC

BLUE

TECH

INSPEC

TRIM ELECT

PROD

BRAKE DRILL

GRIND

LATHE MILL

PUNCH SHEAR

MACHIN

CNCP CNCO

CALIP

MICRO

SETUP

TOOL

PLAST BLOW

COMP

EXTRU

INJECT

REPAIR

ROTO

SETUP

TOOLI PROD

PACK

SHRINK

WELD

ALUM BRAZER

CERT FLUX GAS HELIAR MIG STEEL

STICK SPOT TIG

ARC

BOX FSHIP

МАСНОР



Skills

Maintenance

Printing

Building

Janitorial

**Floor Buffer** 

Equipment

Hydraulics

Schematics

.

HVAC

PLC'S

# **Job Experience**

**Training Only** Code

MAINT

BUILD

JANI

BUFF

EQUIP

HVAC

HYDRA

SCHEM

PRINT

COLATE

INSERT

REJECT

PRESOP

**JOGGER** 

WRHSE

EQUIP

FLIFTC

FLIFT ELECT

GAS PROP

REACH

HIREA CHERRY

JACK

SLIP TURRET

CLAMP

SH/REC PICK

INVENT

FEDEX

WORK

EQUIP

APRON GLOVES

HHAT

BOOTS

GLASS

SHOES

HOOD

RF

UPS

PRESS PRE

BIND

ENV

PLC

**Job Experience** 

Skills	
Manufact	uring
	Assembly
	Precision
	Structural Electronics
Electronic	
	Soldering
	Color-Code Soldering
	Schematics
	PCB
	Blueprints Quality Control
	Technician
Quality C	
•	Inspection
	Trimming
	Electronic
Mashina	Production
Machine (	Brake Press
	Drill Press
	Grinder
	Lathe
	Mill
	Punch Press
Machinist	Shear
wiaciiiiist	CNC Programming
	CNC Operation
	Calipers
	Micrometers
	Set Up
D1	Tool & Die
Plastics	Blow Mold
	Composites
	Extrusion
	Injection Mold
	Repair
	Roto Mold
	Set Up Tooling
Productio	U
Packaging	
0 0	Boxing
	Final Ship
	Shrink Wrap
Welding	ADC
	ARC Aluminum
	Brazers
	Code Certified
	Fluxcore
	Gas
	Heliarc
	MIG Steel
	Stick
	Spot
	TIG

	Bindery
	Collating
	Envelope Stuffing
	Inserting
	Rejects
	Press
	Pre-press
	Press Operator
	Jogger
Warehous	
	Equipment
	Forklift-Certified
	Forklift Non-Certified
	Electric
	Gas
	Propane
	Reach Truck
	Hi-Reach Truck
	Cherry Picker
	Pallet Jack
	Clamp
	Slip Sheet
	Turret
Shipping/	Receiving
	Picker/Packer
	Inventory
	FED EX
	RF Scanner
	UPS
Work / Sa	fety
	Equipment You Own
	Apron
	Gloves
	Hard Hat
	Safety Boots
	Safety Glasses
	Steel Toed Boots
	Welding Hood
Tools you	have (Please List)
1 0013 you	have (1 lease List)

Other Skills not listed on this page:

Previous Safety Training/ OSHA Certification Type

Date Completed

Submit to HR