



3301 E HWY 377 STE 202
 PO BOX 7180
 GRANBURY, TX 76049
 682-936-4446 Office
 682-936-4451 Fax

Application for Employment

THIS BOX TO BE COMPLETED BY SUPERVISOR/HR			
DATE	INTERVIEWED/HIRED BY	LOCATION	
HIRED (CIRCLE ONE) YES <input type="radio"/> NO <input type="radio"/>	STARTING WAGE \$	POSITION	DESIRED START DATE

PERSONAL INFORMATION		
LAST NAME	FIRST NAME	MIDDLE
ADDRESS	CITY	STATE/ZIP
CELL PHONE NUMBER	ALTERNATE PHONE NUMBER	SOCIAL SECURITY NUMBER
E-MAIL ADDRESS		

EMPLOYMENT INFORMATION
Position applied for: _____
Are you a U.S. citizen or legally authorized to work in this country? <input type="radio"/> YES <input type="radio"/> NO (Proof of identity & authorization to work in the U.S. will be required in accordance with federal law)
Have you worked for Renegade before? <input type="radio"/> YES <input type="radio"/> NO Date: _____
Have you ever been convicted of a felony? <input type="radio"/> YES <input type="radio"/> NO If yes, please explain. _____

EDUCATION			
	NAME & LOCATION OF SCHOOL	DID YOU GRADUATE?	SUBJECTS STUDIED/ DEGREES RECEIVED
HIGH SCHOOL		<input type="radio"/> <input type="radio"/>	
COLLEGE		<input type="radio"/> <input type="radio"/>	
OTHER		<input type="radio"/> <input type="radio"/>	

Employment Experience

NAME & PHONE # OF EMPLOYER	START DATE	END DATE & RATE OF PAY
TITLES & DUTIES	REASON FOR LEAVING	

NAME & PHONE # OF EMPLOYER	START DATE	END DATE & RATE OF PAY
TITLES & DUTIES	REASON FOR LEAVING	

NAME & PHONE # OF EMPLOYER	START DATE	END DATE & RATE OF PAY
TITLES & DUTIES	REASON FOR LEAVING	

References (List 3 references who are not related to you)

NAME & PHONE #	PHONE	OCCUPATION
NAME & PHONE #	PHONE	OCCUPATION
NAME & PHONE #	PHONE	OCCUPATION

Emergency Contact

In case of accident or illness, please contact: _____

Phone: _____ Relationship: _____

Other Qualifications & Skills

List any other skills, special training, license (CDL), knowledge of software or equipment, etc., that may qualify you to perform the job-related functions of the job for which you are applying: _____

Disclaimer & Signature

You may be asked to sign a non-disclosure agreement. Is this a concern? YES NO

I certify that all the information submitted by me on this application is true and correct, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

Printed Name *Signature* *Date*

We are an equal opportunity employer committed to hiring a diverse workforce.