



The Right Choice

Salt Lake City, UT
E-Mail: hr@americomtech.com

Application for Employment

AMERICOM Technology, Inc. is an equal opportunity employer and will consider all applicants equally without regard to race, sex, age, color, religion, national origin, veteran status, or any disability as provided in the Americans With Disability Act.

This application will be given every consideration. Please answer all questions as completely as possible.

AMERICOM Technology, Inc. will not consider incomplete applications for employment.

Personal Information

Name: Today's Date:

Home Address:

City, State, & Zip:

Home Phone: Business Phone:

Are you a U.S. Citizen, or are you otherwise authorized to work in the U.S. without restriction? Yes No

Desired Employment: Full Time. Part Time. Temporary / Seasonal.

List any days or hours which you are unable to work:

Desired Position: Date You Can Start: Salary Desired:

If this position requires a Vehicle, are you licensed to do so? Yes. No. If yes, what class of license?

Who referred you to AMERICOM Technology, Inc.? Employment Agency Newspaper Friend Walk in Employee, if so who? Other

Are you currently employed? Yes No May we contact your current employer? Yes No

Have you ever applied at AMERICOM Technology, Inc. before? Yes No Where? When?

Have you ever worked for AMERICOM Technology, Inc. before? Yes No Where? When?

What was the reason for leaving AMERICOM Technology, Inc.?

What was the name of your last supervisor at AMERICOM Technology, Inc.?

EDUCATION

Table with 5 columns: School Level, Name and Location of School, Years Attended, Did You Graduate, Subjects Studied. Rows include High School/GED, College, Trade or Vocational.

EMPLOYMENT HISTORY			
Name of Present or Previous Employer			
Address:		City:	State: Zip:
Starting Date:	Ending Date:	Title:	
Starting Salary:	Ending Salary:	Can we contact your Supervisor? ___Yes ___No	
Name of Supervisor:		Title:	Phone:
Please describe duties and responsibilities:			
Reason for leaving:			

EMPLOYMENT HISTORY			
Name of Present or Previous Employer			
Address:		City:	State: Zip:
Starting Date:	Ending Date:	Title:	
Starting Salary:	Ending Salary:	Can we contact your Supervisor? ___Yes ___No	
Name of Supervisor:		Title:	Phone:
Please describe duties and responsibilities:			
Reason for leaving:			

EMPLOYMENT HISTORY			
Name of Present or Previous Employer			
Address:		City:	State: Zip:
Starting Date:	Ending Date:	Title:	
Starting Salary:	Ending Salary:	Can we contact your Supervisor? ___Yes ___No	
Name of Supervisor:		Title:	Phone:
Please describe duties and responsibilities:			
Reason for leaving:			

EMPLOYMENT HISTORY			
Name of Present or Previous Employer			
Address:		City:	State: Zip:
Starting Date:	Ending Date:	Title:	
Starting Salary:	Ending Salary:	Can we contact your Supervisor? ___Yes ___No	
Name of Supervisor:		Title:	Phone:
Please describe duties and responsibilities:			
Reason for leaving:			

CERTIFICATION

Issuer/Manufacturer	Type/Description	Level	Certification #	Expiration Date

REFERENCES

Please list the names of three references whom you are not related or former Employers

Name	Address	Phone	Occupation

MILITARY

Service Branch	Date Entered	Date Separated	Final Rank

Please tell us about any skills that would apply to this position, (computer experience, typing / shorthand, etc.):

Have you been convicted of a Felony within the last 5 years? Yes No If yes, Please explain below:

Continued on back

AFFIDAVIT

"I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statement made on this application form or during any interviews may be grounds for my immediate discharge.

I hereby authorize **AMERICOM Technology, Inc.** to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.

I agree that, if I am employed, I will abide by all the rules and regulations of **AMERICOM Technology, Inc.**

I understand that the taking of a drug and alcohol test, when given pursuant to company policy is a condition of continued employment. A refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody in the Company is authorized to enter in any written or verbal contracts with me for any definite period of time without the express written consent of the President of the Company. I also understand that my employment is "at-will" and may be terminated by me or by the Company at any time for any reason or for no reason at all, with or without prior notice.

Signature _____ Date ____/____/____

COMPANY USE ONLY

Interviewed by _____ Remarks:

Is the operation of a company vehicle a job requirement? If yes has a request for a driver's record been made?	Yes	No
--	-----	----