

Mesa Fully Formed

Mesa - Office
1111 S Lewis
Mesa, AZ 85210

Mesa - Marble
1111 S Lewis
Mesa, AZ 85210

Gilbert - Corian
1435 N Mondel
Gilbert, AZ 85233

Gilbert - Granite
1220 W Harwell
Gilbert, AZ 85233

Glendale
7335 N 108th Ave
Glendale, AZ 85307

Coolidge
1349 W Industrial Dr
Coolidge, AZ 85228

Tucson
4051 E Columbia
Tucson, AZ 85714

APPLICATION FOR EMPLOYMENT

Equal access to program, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

A) APPLICANT INFORMATION					
SSN			Phone Number		
LAST Name		Middle Initial	FIRST Name		
EMAIL					
Home Mailing Address					Apt/Unit
City			State		Zip
Position(s) applied for			Date available		Desired Salary
Do you have a valid drivers licence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Are you able to mee the attendance requirements of the position?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever worked for this company?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so when?		

F) EMPLOYMENT HISTORY					
Provide the following information for your past four (4) employers, assignments or volunteer activities, starting with the most recent.					
Employer					Phone
Address					Supervisor
Job Title			Hourly Rate/Salary		
			Start \$ _____ Per _____	Final \$ _____ Per _____	
Summarize work performed and job responsibilities					
From	To	Reason for leaving			

Employer					Phone
Address					Supervisor
Job Title			Hourly Rate/Salary		
			Start \$ _____ Per _____	Final \$ _____ Per _____	
Summarize work performed and job responsibilities					
From	To	Reason for leaving			

Employer					Phone
Address					Supervisor
Job Title			Hourly Rate/Salary		
			Start \$ _____ Per _____	Final \$ _____ Per _____	
Summarize work performed and job responsibilities					
From	To	Reason for leaving			



B) EDUCATIONAL BACKGROUND

Highschool				Address	
From	To	Did you Graduate?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree/Course of Study	
College				Address	
From	To	Did you Graduate?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree/Course of Study	
Other				Address	
From	To	Did you Graduate?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree/Course of Study	

C) REFERENCES

Please list three professional references.

Name	Phone	Relation	Years Known
Name	Phone	Relation	Years Known
Name	Phone	Relation	Years Known

D) SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

E) TOOLS

Check tools you have professional experience with

<input type="checkbox"/> Power Drills	Years	Type	<input type="checkbox"/> Buffer/Polisher	Years	Type
<input type="checkbox"/> Saw(s)	Years	Type	<input type="checkbox"/> Grinder	Years	Type
<input type="checkbox"/> Spray Paint Equipment	Years	Type	<input type="checkbox"/> Mixing of Chemicals	Years	Type
<input type="checkbox"/> Truck	Years	Type	<input type="checkbox"/> Fork Lift	Years	Type

G) EMPLOYEE SIGNATURE

I CERTIFY THAT MY ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.
 IF THIS APPLICATION LEADS TO EMPLOYEMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION IN MY APPLICATION OR INTERVIEW MAY RESULT IN MY RELEASE.
 I GIVE CONSENT AND RELEASE FROM LIABILITY FOR THE EMPLOYER TO VERIFY ANY AND ALL INFORMATION ON MY APPLICATION AND BACKGROUND.
 I FURTHER UNDERSTAND THAT UPON A CONDITIONAL "OFFER TO HIRE", I WILL BE REQUIRED TO TAKE AND PASS A PRE-EMPLOYMENT DRUG TEST AT MY EXPENSE.
 I REPRESENT AND WARRANT THAT I HAVE READ AND FULLY UNDERSTAND THE FOREGOING AND SEEK EMPLOYMENT UNDER THESE CONDITIONS.

Signature	Date



This Employer Participates in E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this employer is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants or to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo screening tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS) photograph.

If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or

citizenship status, please call the Office of Special Counsel at 1-800-255-7688 (TDD: 1-800-237-2515).

NOTICE:

Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.

Employment Verification.  **Done.**

For more information on E-Verify, please contact DHS at:

1-888-464-4218



E-VERIFY IS A SERVICE OF DHS AND SSA.

IF YOU HAVE THE RIGHT TO WORK, Don't let anyone take it away.



If you have a legal right to work in the United States, there are laws to protect you against discrimination in the workplace.

You should know that –

No employer can deny you a job or fire you because of your national origin or citizenship status.

In most cases employers cannot require you to be a U.S. citizen or permanent resident or refuse any legally acceptable documents.

If any of these things have happened to you, you may have a valid charge of discrimination that can be filed with the OSC. Contact the OSC for assistance in your own language.

Call 1-800-255-7688, TDD for the hearing impaired is 1-800-237-2515.

In the Washington, D.C., area, please call 202-616-5594, TDD 202-616-5525

U.S. Department of Justice
Civil Rights Division

Office of Special Counsel for
Immigration-Related Unfair
Employment Practices



Or write to:
U.S. Department of Justice
Office of Special Counsel - NYA
950 Pennsylvania Ave., N.W.
Washington, DC 20530