

Application for Employment It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications. Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this

			application.					
PERSONAL DATA								
Name (last, first, middle)								
Street Address and/or Mailing Address			City			State		Zip
Home Phone Number	Cell Number		Email					
Date you can start work	Do you have a	a High School	Diploma or GI	ED?	Yes	No		
POSITION INFORMATION Che	eck all that you are wi	illing to wo	ork					
Hours:	Part Time	Days		Evenings		Weekends		Holidays
Are you authorized to work in the U.S. on	an unrestricted basis?		Yes	No				
Have you ever been convicted of a felony? If yes, explain:	? (Convictions will not necess	sarily disqualif	y an applicant	t for employmen	t.)		Yes	No
Can you perform these essential functions	s of the iob with or without r	easonable acc	commodation	?		Yes	No	
Please list any	education or training you fe technical programs, and mili	eel relates to t			ould help you			schools, colleges, degrees,
School Name	e	Degree			Ado	dress/City/St	tate	
SPECIAL SKILLS List any specia	al skills or experience that yo	ou feel would h	nelp you in the	e position that yo	ou are applyi	ng for (leaders	hip, organizati	ions/teams, etc.
	ee professional references n een list personal, unrelated re		ou, with full r	name, address, p	hone numbe	er, and relation	ship. If you do	n't have three professional
Name	Ado	lress/City/S	tate		Ph	one		Relationship
WORK HISTORY Start with you	Ir present or most recent em	ployment and	l work back. U	Jse separate she	et if necessa	ry. (INCLUDE P	AID AND UNPA	AID POSITIONS)
Job Title #1				Start Date (mo/d			End Date (mo/c	
Company Name				Supervisor's Nan	ne		Phone Number	
City				State			Zip	
Duties:								
Reason for Leaving				Starting Salary			Ending Salary	
May we contact your present employe	er? Yes	No						

VORK HISTORY Start with your present or most recent er	mployment and work back. Use separate sheet if necessary. (I Start Date (mo/day/yr)	End Date (mo/day/yr)
ob Title #2		
ompany Name	Supervisor's Name	Phone Number
ty	State	Zip
ities:		
ason for Leaving	Starting Salary	Ending Salary
ason for Leaving	Starting Salary	
ay we contact your present employer? Yes	No	
VORK HISTORY Start with your present or most recent er	mployment and work back. Use separate sheet if necessary. (II	NCILIDE PAID AND UNPAID POSITIONS)
	Start Date (mo/day/yr)	End Date (mo/day/yr)
bb Title #3		
ompany Name	Supervisor's Name	Phone Number
W .	State	Zip
	State	Zip
	State	Zip
ıties:	State Starting Salary	Zip Ending Salary
uties:		
asson for Leaving	Starting Salary	
ity uties: eason for Leaving May we contact your present employer? Yes		
asson for Leaving	Starting Salary	
eason for Leaving Tay we contact your present employer? Yes	No	Ending Salary NCLUDE PAID AND UNPAID POSITIONS)
uties: eason for Leaving Aay we contact your present employer? Yes VORK HISTORY Start with your present or most recent er	Starting Salary	Ending Salary
uties: eason for Leaving 1ay we contact your present employer? Yes VORK HISTORY Start with your present or most recent er ob Title #4	No	Ending Salary NCLUDE PAID AND UNPAID POSITIONS)
uties: eason for Leaving 1ay we contact your present employer? Yes VORK HISTORY Start with your present or most recent er ob Title #4	No	Ending Salary Ending Salary NCLUDE PAID AND UNPAID POSITIONS) End Date (mo/day/yr)
tties: ason for Leaving ay we contact your present employer? Yes VORK HISTORY Start with your present or most recent er b Title #4 mpany Name	No	Ending Salary Ending Salary NCLUDE PAID AND UNPAID POSITIONS) End Date (mo/day/yr)
ason for Leaving lay we contact your present employer? Yes  /ORK HISTORY Start with your present or most recent er b Title #4 impany Name EV	No mployment and work back. Use separate sheet if necessary. (II Start Date (mo/day/yr) Supervisor's Name	Ending Salary         NCLUDE PAID AND UNPAID POSITIONS)         End Date (mo/day/yr)         Phone Number
tries:  tason for Leaving lay we contact your present employer? Yes VORK HISTORY Start with your present or most recent er bb Title #4 br pany Name ty	No mployment and work back. Use separate sheet if necessary. (II Start Date (mo/day/yr) Supervisor's Name	Ending Salary         NCLUDE PAID AND UNPAID POSITIONS)         End Date (mo/day/yr)         Phone Number
uties: eason for Leaving lay we contact your present employer? Yes VORK HISTORY Start with your present or most recent er bb Title #4 ompany Name ty	No mployment and work back. Use separate sheet if necessary. (II Start Date (mo/day/yr) Supervisor's Name	Ending Salary         NCLUDE PAID AND UNPAID POSITIONS)         End Date (mo/day/yr)         Phone Number
uties: eason for Leaving fay we contact your present employer? Yes VORK HISTORY Start with your present or most recent er bb Title #4 ompany Name ty	No mployment and work back. Use separate sheet if necessary. (II Start Date (mo/day/yr) Supervisor's Name	Ending Salary         NCLUDE PAID AND UNPAID POSITIONS)         End Date (mo/day/yr)         Phone Number
uties: eason for Leaving May we contact your present employer? Yes	No mployment and work back. Use separate sheet if necessary. (II Start Date (mo/day/yr) Supervisor's Name	Ending Salary         NCLUDE PAID AND UNPAID POSITIONS)         End Date (mo/day/yr)         Phone Number
uties: eason for Leaving fay we contact your present employer? Yes VORK HISTORY Start with your present or most recent er bb Title #4 ompany Name ty	No mployment and work back. Use separate sheet if necessary. (II Start Date (mo/day/yr) Supervisor's Name	Ending Salary NCLUDE PAID AND UNPAID POSITIONS) End Date (mo/day/yr) Phone Number

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize Common Sense Compressor to make an investigation of any of the facts set forth in this application and release Common Sense Compressor may contact any listed references on this application. I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

Applicant Signature

Date

## Please submit completed application to: litza@cscompressor.com