



JL Theis, Inc.
 860 Quaker Ave, Ste 102
 Jordan, MN-55352
 Phone: 952-492-3888
 Fax: 952-492-3007

Please print clearly and answer all questions completely.

Employment Application – Equal Opportunity Employer

APPLICANT INFORMATION												
Last Name				First			M.I.			Date		
Street Address							Apartment #					
City				State			ZIP					
Phone				E-mail address								
Cell Phone				Date Available			Desired Salary					
Position Applied for												
Are you legally authorized to work in the U. S.?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>								
Have you ever applied for a job with this company?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If so, when							
Do you have any relatives or friends that work for this company?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If yes, explain							
EDUCATION												
High School or GED				Address								
From	To		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				
College				Address								
From	To		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				
Other				Address								
From	To		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				
REFERENCES												
<i>Please list three professional references.</i>												
Full Name				Relationship								
Company				Phone								
Address												
Full Name				Relationship								
Company				Phone								
Address												
Full Name				Relationship								
Company				Phone								
Address												



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CURRENT AND PREVIOUS EMPLOYMENT (START WITH YOUR CURRENT OR LAST EMPLOYER)

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities (detailed)			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities (detailed)			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities (detailed)			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

LIST ANY EQUIPMENT OR MACHINERY YOU CAN LEGALLY OPERATE

Class of Equipment (Truck, Skid loader, Excavator, etc.)	Type of Equipment (Van, Tank, Flat. etc.)	From - To	Approx. number of hours

List any special qualifications or other information which may help qualify you for the position:



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DISCLAIMER AND SIGNATURE

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal. I understand that alcoholic beverages or drugs are forbidden from the job site and also understand that use of alcohol or drugs may be grounds for discharge.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no defined period and may, regardless of the date of payment of my wage and salary be terminated at any time without prior notice and without cause.

Signature

Date