



907.488.2934 FAX 907.488.7856 WWW.UNIVERSALWELDING.NET

Application for Employment

Universal Welding Values:

We are proud to have a drug free environment \sim We pride ourselves in having positive attitudes! We are proud to be prompt and timely!

Name:	Date:
Address:	Phone #
Date of birth: (optional)	SS # (optional)
How did you hear about this job? ☐ Newspaper ☐ Or ☐ Other	
Position(s) applied for	Desired wage
Date available for work/	
Are you legally eligible for employment in the USA?	Yes No (If yes, verification will be required)
If necessary for the job, are you able to: Work Overtime? □ Yes □ No Provide a valid Alaska Drivers License? □ Yes □	l No <i>Out-of-state?</i> □ Yes □ No
Are you employed now? Yes No If yes, may we inquire of your present employer? Are you on lay-off and subject to recall? Yes I	Yes □ No □ No
If necessary for the job, are you over: 18 21 (Please Contraction)	Circle One)
Have you ever been convicted of a felony? ☐ Yes	□ No
Is there any reason you cannot perform the essential funct for? \square Yes \square No	tions of the position you are applying
If yes, what reasonable accommodations can be made for	·you?
Can you lift 40 lbs to your waist and carry it for 100 feet?	P □ Yes □ No

80 lbs?

☐ Yes

□ No

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EDUCATION School Name/Locat High School	ion	Yrs. Completed	Field of Study	Graduate or Degree
College/University				
Business/Technical				
Other (May include grammar school)			-	
EMPLOYMENT: List last emplo				
employers related to this job are listed h Employer Name and Address	Position Title/Duties Sk	re, in the summary (following this section), Position Title/Duties Skills		To
			Reason for Leaving	
	Supervisor's Name	Telephone		
Employer Name and Address	Position Title/Duties Sk	tills	Dates Employed From / Salary	To /
			Reason for Leaving	
	Supervisor's Name	Telephone		
Employer Name and Address	Position Title/Duties Sk	tills	Dates Employed From / Salary	
			Reason for Leaving	
	Supervisor's Name	Telephone		
Employer Name and Address	Position Title/Duties Sk	cills	Dates Employed From / Salary	
			Reason for Leaving	
			Reason for Leaving	
	Supervisor's Name	Telephone		
MILITARY SERVICE	_		ch Branch:	
MILITARY SERVICE Date of duty From	Supervisor's Name Yes	o If yes, which	ch Branch:	

Summarize other employm	nent related to this job		
Professional Licenses, Cert	tifications or Registrations:		
Additional experiences, sk	ills or qualifications which yo	ou feel would especially	y fit our needs:
REFERENCES: List two po	ersonal references who are not i	relatives or former superv	isors
Name	Address/Telephone	Occupation	Years known
personal and employment refer application, and are subsequentl information derived from the ch. If necessary for employment, you work in the USA, have a physical All job offers are cont. I understand and agree to the inf	ou may be required to: supply your al examination, or to sign a conflictingent upon passing a standard of	nave misrepresented or omion your job. You may make the birth certificate or other property of interest agreement and a	tted any facts on this te a written request for oof of authorization to abide by its terms.
Equal Employment Opport Action Program, all employers	tunity: While many employers a are required to provide equal emg and reporting purposes only. Th	ployment opportunity and i	nay ask your national
In case of accident or illness, please contact: Name		Daytime Phone	o:
EMPLOYER SECTION:			