



Application for Employment. Please use black or blue ink.

(707) 433-1913 · costeaux.com

PERSONAL

FIRST NAME		MIDDLE	LAST NAME		DATE	
STREET ADDRESS			CITY	STATE	ZIP	SOCIAL SECURITY NUMBER (LAST FOUR ONLY) XXX - XX -
DESIRED POSITION:					HOME PHONE	
ARE YOU SEEKING A DAY SHIFT POSITION OR A NIGHT SHIFT POSITION?					CELL PHONE	
HAVE YOU EVER PREVIOUSLY APPLIED FOR EMPLOYMENT WITH OUR COMPANY?		<input type="checkbox"/> YES <input type="checkbox"/> NO	MONTH/ YEAR		EXPECTED RATE OF PAY	
WHAT PROMPTED YOU TO SELECT COSTEAUX AS A POTENTIAL EMPLOYER?						
ARE YOU AVAILABLE FOR FULL TIME WORK?		<input type="checkbox"/> YES <input type="checkbox"/> NO	WHAT DAYS ARE YOU NOT AVAILABLE FOR WORK:		WILL YOU WORK OVERTIME IF NEEDED?	<input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU HAVE RELATIVES OR FAMILY WORKING FOR COSTEAUX? IF YES, PROVIDE NAME & RELATIONSHIP				<input type="checkbox"/> YES <input type="checkbox"/> NO	WHEN WILL YOU BE AVAILABLE TO BEGIN WORK?	
SPECIAL TRAINING OR SKILLS (LANGUAGES, MACHINE OPERATION, PROGRAMS, ETC.)					ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE US? <input type="checkbox"/> YES <input type="checkbox"/> NO	
					* PROOF OF ELIGIBILITY IS REQUIRED UPON EMPLOYMENT	
DRIVER APPLICANTS ONLY: ARE YOU 18 YRS. OF AGE OR OLDER?		<input type="checkbox"/> YES <input type="checkbox"/> NO	ALL OTHER APPLICANTS: ARE YOU 16 YRS. OF AGE OR OLDER?		<input type="checkbox"/> YES <input type="checkbox"/> NO	IF NO, EMPLOYMENT IS SUBJECT TO VERIFICATION OF MINIMUM LEGAL AGE REQUIREMENT

EDUCATION

HIGH SCHOOL		GRADUATED?	<input type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE		GRADUATED?	<input type="checkbox"/> YES <input type="checkbox"/> NO
DEGREE(S):			
LIST SPECIAL INTERESTS AND HOBBIES:			

OFFICE USE ONLY / EMPLOYMENT DATA:

DATE HIRED:	STARTING DATE:	RATE OF PAY:
<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME	POSITION:	DEPARTMENT:
		WCC:

EMERGENCY CONTACT INFORMATION

NAME	RELATIONSHIP	PHONE NUMBER	OCCUPATION	ADDRESS
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EMPLOYMENT HISTORY (SHADED AREAS FOR COMPANY USE ONLY)

PLEASE PROVIDE ACCURATE, COMPLETE FULL AND PART TIME EMPLOYMENT RECORD. START WITH THE PRESENT OR MOST RECENT EMPLOYER.

COMPANY NAME:	PHONE:
ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
SUPERVISOR NAME:	
JOB TITLE AND DESCRIPTION OF WORK YOU PERFORMED:	

VERIFIED / COMMENTS:

COMPANY NAME:	PHONE:
ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
SUPERVISOR NAME:	
JOB TITLE AND DESCRIPTION OF WORK YOU PERFORMED:	

VERIFIED / COMMENTS:

COMPANY NAME:	PHONE:
ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
SUPERVISOR NAME:	
JOB TITLE AND DESCRIPTION OF WORK YOU PERFORMED:	

VERIFIED / COMMENTS:

REFERENCES:

NAME:	RELATIONSHIP:	PHONE:
NAME:	RELATIONSHIP:	PHONE:
NAME:	RELATIONSHIP:	PHONE:

CERTIFICATION – PLEASE READ, SIGN AND DATE

All applications for employment are judged solely based on qualification and ability without regard to age, sex, race, national origin, religion, sexual orientation, marital status, disability, veteran status or other classification protected by law.

I acknowledge that the Company follows an employment – at – will policy, such that the Company or I may terminate my employment at any time for any reason. I understand that this application is not a contract of employment. I understand that to be employed, I must be lawfully authorized to work in the United States and show the Company documentation that will prove this.

I understand and agree that my previous employers may be contacted.

I certify that all the statements herein are true and accurate and understand that any falsification or omission shall result in dismissal.

Your Signature: _____ Date: _____

EMAIL COMPLETED APPLICATION TO: TEAM@COSTEAUX.COM