

K&E Fabricating Co., Inc. 40 Stanley Street, Buffalo, New York 14206 Phone (716) 829-1829, Fax (716) 829-1828

Employment Application

		Applic	cant Inforn	nation			
Full Name:				Date:			
	Last	First			M.I.		
Address:							
	Street Address					Apartment/Unit #	
	011					770.0	
	City				State	ZIP Code	
Phone:			Email_				
Date Availal	ole:	Social Security N	lo.:		Desired	d Salary: <u>\$</u>	
Position App	olied for:						
Are you a ci	tizen of the United Stat		NO □ If no,	are you	authorized to w	YES rork in the U.S.?	NO
Have you ev	ver worked for this com		NO □ If yes	, when?			
Have you e	ver been convicted of a	YES 1 felony?	NO				
If yes, expla	in:						
			Education				
High School	l:	Ad	dress:				
From:	To:	Did you grad	YES	NO	Diploma::		
College:		Ad	dress:				
From:	To:	Did you grad	YES luate?	NO	Degree:		
Other:		Ad	dress:				
From:	To:	Did you grad	YES luate?	NO	Degree:		

	References	
Please list three	e professional references.	
Full Name:		Relationship:
Company:		Phone:
Address:		
Full Name:		Relationship:
Company:		Phone:
Address:		
Full Name:		Relationship:
Company		Phone:
Address:		
	Previous Employment	
Company:		Phone:
		Supervisor:
Job Title:	Starting Salary:	Ending Salary:\$
May we contact	YES NO your previous supervisor for a reference?	
	, can promote department a reneration.	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:	Ending Salary:
Responsibilities:		
From:	To: Reason for Leaving:	
May we contact	YES NO	
way we contact	your previous supervisor for a reference?	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:\$	Ending Salary:\$

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Responsibilities:			
From: To:	Reason fo	r Leaving:	
May we contact your previous supervisor for a reference?	YES	NO	
Military	Service		
Branch:		From:	To:
Rank at Discharge:			
If other than honorable, explain:			
Disclaimer a	nd Signat	ure	
I certify that my answers are true and complete to the be	st of my kno	owledge.	
If this application leads to employment, I understand that interview may result in my release.	false or mi	sleading informa	tion in my application or
Signature:			Date:

DRUG TESTING APPLICATION CONSENT

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I,, do HealthWorks Western New York for d released to K&E Fabricating Co., Inc.	hereby agree to submit testing to be performed by etection of drugs. I give permission for test results to be
results or test sample will result in with	refusal to be tested, or any attempt to affect the test ndrawal of my application for employment, withdrawal of ve received from K&E Fabricating Co., Inc. or termination esults are received.
Application Signature	Date
Witnessed by:	Date