

APPLICATION FOR EMPLOYMENT

We are an Equal Opportunity Employer
All qualified applicants are considered regardless of race, religion, color, age, sex. marital status, nationality, veteran status or non-disqualifying disability.

			Date:		
1.	Position applied for				
2.	Social Security No.				
3.	Full Legal Name				
		LAST	FIRST	MI	
4.	Address				
		CITY	STATE	ZIP	
5.	Phone	Home: ()	Other ()		
6.	Education	Highest Grade Completed:			
		Post High School 1	Name of College/University	Status or Degree	
		Post High School 2	Name of College/University	Status or Degree	
		Post High School 3	Name of College/University	Status or Degree	
		Certifications			
		Proficiencies / Skills			
7.	Reference 1	Last Name	First Name		
		Relationship	Phone Number		
		Address	City, State and Zip		
8.	Reference 2	Last Name	First Name		
		Relationship	Phone Number		
		Address	City, State and Zip		

mployer			Duties:
Job Title			
Address			
Phone			
Tenure Years	Hire Date	Leave Date	Reason for Leaving:
Salary Start	Sala	ry End	
Employer			Duties:
lob Title			
Address			
Phone			
Tenure Years	rs Hire Date Leave Date		Reason for Leaving:
Salary Start	Sala	ry End	
F1			I Dutter
Employer Job Title		Duties:	
Address		_	
Phone			
Pnone			
	Hire Date	Leave Date	Reason for Leaving:
Tenure Years		ry End	

	EOE					
10.	MISCELLANEOUS					
a.	Check which shift you will accept: Day Evening Night Rotating Weekends Specify shift hours					
b.	Check which job status you would accept: ☐ Full-time ☐ Part-time (specify)					
c.	Check which employment status you'd accept: Salaried (benefits) Hourly Full -Time Part-time					
d.	Are you willing to accept employment which requires you to travel? ☐ No ☐ Yes. If yes, ☐ During the day only,					
	□ Occasionally overnight, □ Frequently overnight.					
e.	For purposes of compliance with The Immigration Reform and Control Act, are you legally eligible for employment in the United States? Yes No. Under the Immigration Reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you be employed.					
f.	Are you willing to provide your own transportation if necessary for your employment? Yes No.					
g.	Have you ever been convicted for any violation(s) of law, including moving traffic violations? \square Yes \square No If YES, please provide the following:					
	Description of offense:					
	Statute or ordinance(if known): Date of Charge:; Date of Conviction					
	County, City, State of,,,,,					
	(For additional convictions use plain paper. Include all information listed above.)					
11.	Where did you hear about Spartan Sands?					
12.	When will you be available to start work? (No date is necessary if you are available as soon as you give two (2) weeks notice.)					
	Available Date					
13.	CERTIFICATION					
fal Sa ba th co	hereby certify that all entries on both sides and attachments are true and complete, and I agree and understand that any sification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment in Spartan ands, LLC. I understand that all information on this application is subject to verification and I consent to criminal history eckground checks. I also consent to references and former employers and educational institutions listed being contacted regarding is application. I further authorize the Commonwealth to rely upon and use, as it sees fit, any information received from such intacts. Information contained on this application may be disseminated to other agencies, nongovernmental organizations or stems on a need-to-know basis for good cause shown as determined by the agency head or designee.					
	Date: Signature:					