



Clear Form

### Application for Employment

Tiger-Sul Products, LLC provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability or genetics. In addition to federal law requirements, Tiger-Sul Products, LLC complies with applicable state and local laws governing nondiscrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including recruitment, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

Applicant's Name:	Last:	First:	MI:	Date:
Address:				
Home Telephone Number/Area Code:			Business/Other Telephone Number/Area Code:	

Position applied for: \_\_\_\_\_ Date available for work: \_\_\_\_\_

How did you learn of this position?

<input type="checkbox"/>	Employment Agency (give name) _____
<input type="checkbox"/>	Newspaper Ad
<input type="checkbox"/>	Company Reputation
<input type="checkbox"/>	Other (please explain) _____

Are you currently authorized to work in the United States?  YES  NO  
 Proof of eligibility will be required if hired.

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation?  YES  NO

Have you ever worked or applied for employment at Tiger-Sul Products, LLC before?  YES  NO  
 If yes - Worked? \_\_\_\_\_ When? \_\_\_\_\_ Applied? \_\_\_\_\_ When? \_\_\_\_\_

**EDUCATION:**

	Name and Location of School	Check Last Year Completed				Did You Graduate	Courses Studied & Degree(s) Received
High School		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	
		1	2	3	4	<input type="checkbox"/> No	
College		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	
		1	2	3	4	<input type="checkbox"/> No	
Graduate School		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	
		1	2	3	4	<input type="checkbox"/> No	
Trade, Business, or Correspondence School		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes	
		1	2	3	4	<input type="checkbox"/> No	

**EMPLOYMENT:**

Are you employed now?  Yes  No      If yes, may we inquire of your present employer?  Yes  No  
 May we contact your former employers?  Yes  No

List all jobs and activities including schools, part-time employment while in school and self-employment.

**BEGIN WITH MOST RECENT JOB**

Employer:	<u>EMPLOYMENT DATES:</u>
Address:	From:    Month        Year
Name & Title of Supervisor:	To:        Month        Year
Your Position:	
Description of Duties:	
Reason for Leaving:	
Employer:	<u>EMPLOYMENT DATES:</u>
Address:	From:    Month        Year
Name & Title of Supervisor:	To:        Month        Year
Your Position:	
Description of Duties:	
Reason for Leaving:	
Employer:	<u>EMPLOYMENT DATES:</u>
Address:	From:    Month        Year
Name & Title of Supervisor:	To:        Month        Year
Your Position:	
Description of Duties:	
Reason for Leaving:	
Employer:	<u>EMPLOYMENT DATES:</u>
Address:	From:    Month        Year
Name & Title of Supervisor:	To:        Month        Year
Your Position:	
Description of Duties:	
Reason for Leaving:	

**REFERENCES:**

List three persons who have known you for at least one year. Do not give names of former employers or relatives.

NAME AND ADDRESS	PHONE NUMBER INCL. (AREA CODE)	OCCUPATION	YEARS KNOWN
1.			
2.			
3.			

I authorize and request any and all of my present and former employers, school authorities, and the individuals listed by me on this application to furnish to Tiger-Sul Products, LLC or any agent acting on its behalf, information concerning me relevant to this application including information about my employment record (including a statement of the reasons for the termination of my employment), work performance, abilities and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages of whatever nature arising from furnishing the requested information.

I certify that the information contained in this application is correct and complete to the best of my knowledge and belief. I understand that any false statement, omission or misrepresentation of the facts called for on this application will lead to the rejection of my application or to my dismissal from employment.

Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

---

**DO NOT WRITE BELOW THIS LINE - FOR Tiger-Sul Products, LLC USE ONLY**

---

Date Employed: \_\_\_\_\_ Starting Salary: \_\_\_\_\_

Department: \_\_\_\_\_

Employed by: \_\_\_\_\_ Interviewed by: \_\_\_\_\_

Comments: \_\_\_\_\_

---

---

---

---

---

---

---

---