



# Application for Employment

An Equal Opportunity Employer

PO Box 1340  
Brewton, AL 36427  
(251) 867-7752

**Notice to Applicants and Employees:** *Screening tests for alcohol and illegal drug use may be required before hiring and during employment.*

**Please initial each item below indicating that you understand and agree to the following terms:**

\_\_\_\_\_ Frit Car, Inc. reserves the right to require its employees to submit to tests for alcohol or drugs, and to allow inspection of any items brought into or taken out of the plant. I understand that refusal to submit to a drug or alcohol test or search when requested to do so, may result in termination of my employment.

\_\_\_\_\_ This employment application and any other company documents are not contracts of employment. If hired, my employment is at-will and can be terminated at any time, with or without notice, for any reason, and any individual who is hired may voluntarily leave employment at any time. Any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any existing or prospective employee. I also understand that its status can only be altered by a written contract of employment, which is specific as to all material terms and is signed by an officer of Frit Car, Inc.

\_\_\_\_\_ If I am offered employment by Frit Car, Inc., any such offer is conditional upon the results to the Company's satisfaction of my pre-hiring physical examination, the verification of all my personal data, and the results of a drug screening analysis for substance abuse. The results may be grounds for withdrawing a job offer, or terminating my employment.

\_\_\_\_\_ Nothing in this application is intended to imply or create an employment relationship or contract for employment.

\_\_\_\_\_ Frit Car, Inc. will not discriminate against any employee or applicant for employment because of age, religion, sex, race, color, national origin, sexual orientation, or disability. Answers to questions within this application will be utilized for applicable job related information only.

\_\_\_\_\_ I hereby certify that all information given by me in this application is true in all aspects. I agree that if I am employed and the information is found by Frit Car, Inc. to be intentionally false in any respect, my employment will be immediately terminated without notice. I further certify and agree that, if employed by Frit Car, Inc., I will abide by and comply with all of the rules and policies of Frit Car, Inc., including its policies prohibiting harassment and discrimination, and I understand and agree that I will be responsible for reporting any potential violations of such policies. I further understand that if employed by Frit Car, Inc., I will be employed at-will, meaning that either Frit Car, Inc. or I may terminate the employment relationship for any reason and at any time, all without notice.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Position for which you are applying: \_\_\_\_\_



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This application is to be active for a period of ninety (90) days. All applications are kept on file for a period of one (1) year. All information will be treated confidentially. Failure to answer questions fully will void this application. The use of this application does not indicate that any positions are open and does not in any way obligate this company.

Please fill in all spaces.

## Personal

Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Present Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ How Long? \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

County and State of Birth: \_\_\_\_\_

Prior Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ How Long? \_\_\_\_\_

Did any Frit Incorporated Company previously employ you?  Yes  No

If yes, Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Are you presently on layoff or leave from any other company? \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_ (Conviction will not necessarily disqualify you from employment)

If yes, explain: \_\_\_\_\_

Are you eligible to work in the United States?  Yes  No Proof of eligibility will be required before you can be employed.

What date are you available for employment: \_\_\_\_\_

Indicate when you can work:  Office (Days Only) **Plant -**  Days  Evenings  Nights

Would you accept part-time work?  Yes  No Would you accept temporary work?  Yes  No

## Education

Elementary School City/State: \_\_\_\_\_  
Check Highest Grade Completed  1  2  3  4  5  6  7  8

High School City/State: \_\_\_\_\_  
Check Highest Grade Completed  1  2  3  4 Did You Graduate? \_\_\_\_\_

College(s) and/or Vocational Schools City/State:	Date From	Date To	Date Graduated	Date Degree Received/Expected	Average Grade	Course Major/Field

If you did not graduate High School, did you receive a General Education Diploma (GED)?  Yes  No

If yes, please list date received: \_\_\_\_\_

Military Experience: Branch of Service \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Training and Duties while in Service: \_\_\_\_\_



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## Employment Data

Give past employment record as completely as possible starting with most current employer.

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Salary: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

Duties and Equipment Operated: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Salary: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

Duties and Equipment Operated: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Salary: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

Duties and Equipment Operated: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Salary: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

Duties and Equipment Operated: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Please list any other special training, skills, and experience, which will help you with our company. Important: List all factory and/or office equipment you can operate.



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## Professional Licenses and Certifications

Type	License Number	Date Issued	Renewal Date	State

## References

List at least three responsible adults who have knowledge of your work ethic, experience, and ability.  
(Do not include relatives or fellow employees).

Name	Address	Telephone	Occupation

Do you know anyone who currently works or has worked at Frit Car, Inc.? If yes, please List below:

Name	Occupation

Please feel free to make notation of any additional information that you believe might be useful to Frit Car, Inc. Please omit any reference to organizations or activities that would indicate race, religion, age, sex, national origin or ancestry, sexual orientation, disability, or political persuasion.

I hereby certify that all information given by me in this application is true in all aspects. I agree that if I am employed and the information is found by Frit Car, Inc. to be intentionally false in any respect, my employment will be immediately terminated without notice. I further certify and agree that, if employed by Frit Car, Inc., I will abide by and comply with all of the rules and policies of Frit Car, Inc., I will be employed at-will, meaning that either Frit Car, Inc. or I may terminate the employment relationship for any reason and at any time, all without notice.

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



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## Authorization for release of personal data.

I, the undersigned, hereby authorize and request any present or former employer, educational institution, law enforcement agency, financial institution, or other persons having personal knowledge about me to furnish Frit Car, Incorporated, and/or its agents, with all information in their possession regarding me, in connection with an application for or retention of employment. Further, I hereby release from liability and hold harmless all persons and corporations supplying this information to Frit Car, Inc., and/or its agents. A photocopy of this authorization is as effective as the original.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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## THIS FORM IS VOLUNTARY AND WILL BE HELD IN THE STRICTEST OF CONFIDENCE Equal Opportunity Information

Frit Car, Inc. provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, disability, genetic information, marital status, amnesty, or status as a covered veteran in accordance with applicable federal, state and local laws. Frit Car, Inc. complies with applicable state and local laws governing non-discrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including, but not limited to, hiring, placement, promotion, termination, layoff, recall, transfers, leave of absence, compensation, and training.

The Company requests that you provide the following information, which will not be used in evaluating your application for employment, or in the case of incumbent employees, your performance evaluation. This section is voluntary and will be kept confidential.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Handicapped:  Yes  No Sex:  Male  Female

Race:  White  Black  Hispanic  Asian  Native American

Any Religious accommodations required? \_\_\_\_\_

Veteran  Vietnam Era Veteran  Disabled Veteran Dates: \_\_\_\_\_

If you have a handicap or disability which might affect your performance or create a hazard to yourself or others in connection with the job for which you are applying or are presently performing, please state the following: (1) the skills and procedures you use or intend to use to perform the job notwithstanding the handicap or disability and, (2) the accommodations we could make which would enable you to perform the job properly and safely:



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## Notice/Authorization

In connection with my application for employment, I understand that a consumer report may be requested and may include information as to my Character, Work Habits, Credit, Academic-Credential Verification, Job Performance, Experience and Reasons for Termination. Further I understand that you may be requesting information concerning my Workers' Compensation Claims, Motor Vehicle Operations History, Criminal and Civil History from various private and public sources along with other public records available.

I hereby authorize and release from all liability, without reservation, Sterling Info systems and any Law Enforcement Agency, Administrator, State/Federal Agency, Institution, Information Service Bureau, Employer, Employee, Company or person gathering or furnishing the above-mentioned information.

I further acknowledge that a telephone FAX or photographic copy of this document will be as valid as the original.

Applicant Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This information is being verified by Sterling Info systems  
Any information or questions should be directed to:

Sterling Info systems at 1-800-943-2589

### ATTENTION APPLICANTS:

Send this application via email to [HR Manager](#)  
OR fax to (251) 867- 4856 - Attn: HR Manager