

Application For Employment



We are an Equal Opportunity Employer and committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section even if you submit a resume

Personal Information

Last Name		First	Middle	Social Security #
Address		City	State	Zip
Mobile Number	Email Address	Will you work overtime if requested? Yes <input type="checkbox"/> No <input type="checkbox"/>		Referred by:
Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/>		Are you legally eligible for employment in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Other special training or skills (languages, machine operation, etc..)				

Position

Position You Are Applying For	Available Start Date	Desired Pay
Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal/Temporary		

Education

School Name	Location	Years Attended	Degree Received	Major/Minor

References

Name	Title	Company	Phone

Employment History

Employer (1)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (2)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (3)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (4)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my dismissal from RIG.
 I understand that acceptance of an offer of employment does not create a contractual obligation upon RIG to continue to employ me in the future. Either RIG or the employee can terminate the employment relationship without cause at any time.
 If you decide to engage an investigative consumer reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained, you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the request.

Name (Please Print)

Signature

Date
