

C. WILLIAM HETZER, INC.
An Equal Opportunity Employer
Application for Employment--Field

P. O. Box 506, Hagerstown, Maryland 21741-0506 Phone: 301-733-7300; Fax: 301-733-0812

PERSONAL DATA			
NAME	Last	First	Middle
PRESENT ADDRESS	No. & Street		Apt. No.
	City	State	Zip Code
PHONE	If you do not have a phone, how can we contact you?		
Social Security No.:		How long have you lived at your present address?	
Are you at least 18 years of age? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Who should be notified in case of emergency?			Phone:
Military Service? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes, what branch?	
When?	From	To	Rank when discharged:
Special Training:			

EDUCATION			
	Name & Address of School	Program of Study	Years
HIGH SCHOOL <input type="checkbox"/> No <input type="checkbox"/> Yes			1 2 3 4
AFTER HIGH SCHOOL <input type="checkbox"/> No <input type="checkbox"/> Yes			1 2 3 4
If you did not attend high school, how many years of schooling have you completed?			

QUALIFICATIONS			
What type of job are you applying for?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Laborer	<input type="checkbox"/> Truck Driver
	<input type="checkbox"/> Part-time	<input type="checkbox"/> Carpenter	<input type="checkbox"/> Other
	<input type="checkbox"/> Summer only	<input type="checkbox"/> Equipment Operator	
			Hourly Wage Expected
Describe any special skills that you have and any equipment you can operate.			
When will you be available for work?			

PREVIOUS EMPLOYERS				
Have you worked for us before? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, when?				
List your last 3 employers, beginning with your current or most recent employer.				
DATES	EMPLOYER & ADDRESS	POSITION	DUTIES	REASON FOR LEAVING
From				
To				
From				
To				
From				
To				

“Under Maryland law an Employer may not require or demand any applicant for employment or prospective employment or any employee to submit to or take a polygraph, lie detector or similar test or examination as a condition of employment. Any Employer who violates this provision is guilty of a misdemeanor and subject to a fine not to exceed \$100.”

The above information is correct to the best of my knowledge.

Date: _____ Signature of Applicant: _____

If you need more space, please use the back of this form.

(4/24/03)