www.cavehillcorp.com



Phone: 800-522-4980 Phone: 540-289-5051 Fax: 540-289-7592

Employme	nt Application	Applicar	nt Information					
Full Name:		Applicar	nt Information		Date:			
	Last	First		M.I.	_ Date.			
Address:	Street Address			Apartment	/Unit#			
	City			State		ZIP Code		
Phone:	•		Email Address:					
Date Availal		urity No.:		Desired	Salary:	\$		
Position App	olied for:	YES	NO				YES	NC
Are you a ci	itizen of the United States?	YES		ver been convicte	d of a felony			
Have you ev	ver worked for this company?	YES	If so, when	?				
Have you ev	ver been convicted of a felony?							
If yes, expla	in:							
			ducation				<u> </u>	
High School	:	Ad	ldress: YES	NO				
From:	To:	Did you	ı graduate?	Degree:				
College:		Ad	ldress:YES	NO				
From:	To:	Did you	ı graduate?	Degree:				
Other:		Ad	ldress:					
From:	To:		YES ı graduate?	NO Degree:				
Dlease list	three professional references.	Re	eferences					
	tillee professional references.		Rela	tionship:				
Company:				Phone: ()			
Address:								
Full Name:			Rela	tionship:				
Company:				Phone: ()			
Address:								
				tionship:				
Company:				Phone: ()			
Address:								

	Previous Emplo	yment		
Company:			Phone:	()
Address:			_ Supervisor:	
Job Title:	Starting Salar	/: \$		Ending Salary: \$
Responsiblities:				
From:	To: Reason for Leaving:	VEQ.	NO	
May we contact your prev	vious supervisor for a reference?	YES	NO	
Company:			Phone:	()
Address:			Supervisor:	
Job Title:	Starting Salar	/: \$		Ending Salary: \$
Responsiblities:				
From:	To: Reason for Leaving:			
May we contact your pre	vious supervisor for a reference?	YES	NO	
Company:			Phone:	()
Address:			Supervisor:	
Job Title:	Starting Salar	/: \$		Ending Salary: \$
Responsiblities:				
From:	To: Reason for Leaving:			
May we contact your pre	vious supervisor for a reference?	YES	NO	
Branch:	Military Ser	vice	From:	To:
Rank at Discharge:		Туре	e of Discharge:	
If other than hanorable, e	xplain:			
	Disclaimer and S	ignature		
I certify that my an	swers are true and complete to the best	of my knwle	edge.	
If this application leads to result in my release.	o employment, I understand that false or	misleading ii	nformation in r	my application or interview may
Signature:			Date:	



NAME:	DATE:
PHONE:	SSN#:

	Skill Level	Years of	Employer where most
Areas of Knowledge	Excellent/Good/Fair	Experience	Experience was gained
Air Compressor Mech.		ZAPOTIONIO	
Electrical Work			
Hydraulics			
Pneumatics			
Welding – MIG			
Welding – TIG			
Welding – Stick			
Blueprint reading			
Layout Work			
Welding Aluminum			
Stainless Fabrication			
Aluminum Fabrication			
Shearing			
Braking			
Driving Record			
CDL's			
Bolt/Nut Identification			
Crane Operator Exp.			
Feed Mill Knowledge			
Diesel Mechanic			
Auto Mechanic			
Arc Gouging			
Ornamental Handrails			
Step Layout/fabrication			
Rigging			
Working in high areas			
Leadership			
Overall Attitude			
Painting (Spray)			
Machining			