



APPLICATION FOR EMPLOYMENT

An equal opportunity employer

PERSONAL INFORMATION

NAME

Last

First

Middle

ADDRESS

Street

City

State

Zip

PHONE NUMBER

REFERRED BY

EMPLOYMENT DESIRED - State the specific job position for which you are applying.

Position

Date you can start

Desired Salary

How did you hear about this opportunity?

Are you currently employed?

May we contact your current employer?

Date: Month and Year	Name and Address of Employer	Salary	Position	Reason For Leaving
From				
To				
From				
To				
From				
To				
From				
To				

I know the following Delta Centrifugal/Texas Stainless Employees:

Employee	Relationship

The Statement regarding my relationship to Delta Centrifugal/Texas Stainless employees is correct.

I authorize investigation of all statements and information contained in this application. I understand that, if I am employed by Delta Centrifugal Corporation that:

1. A misrepresentation or omission of fact(s) in my application is cause for dismissal;
2. My employment with the company can be terminated without notice to me;
3. I will abide by all policies and procedures of the company and that my failure to do so will result in disciplinary action, up to and including termination;
4. I will work overtime if requested to do so and my refusal to do so will result in disciplinary action, up to and including termination;
5. The decision of whether I will be employed by the company is solely and exclusively the decision of the company.
6. Pre-employment alcohol and drug screening is required.

Date _____

Signature _____