



COBALT

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Name: _____ **E-Mail Address:** _____
Last First M.I.

Address: _____ **Phone:** (____) _____
Street City State Zip

Position applied For: _____ **Referral Source:** _____

Are you at least 18 years of age? Yes No

Are you a U.S. Citizen or legally authorized to work in the U.S.? Yes No

Date you are able to start work: _____

May we contact your current employer? Yes No

Are you on layoff status or subject to recall elsewhere? Yes No

Pay Expected: \$ _____ per _____

If hired, how long do you plan to continue working for the company? _____

Do you wish to work: Full-time Part-time
 Temporary

Are you willing and available to work?

Days Evenings Nights
 Overtime Weekends Holidays

If applying for a job that requires one, do you have a valid driver's license? Yes No

Do you smoke? Yes No

Have you previously applied with us? Yes No
When _____

Have you previously worked with us? Yes No
When _____

Are any of your records under a different name? Yes No
If so, what name _____

Do you have any relatives working for us? Yes No
If so, who? _____

Is there any reason you might be unable to meet our attendance requirements? Yes No
If yes, please explain _____

EDUCATION/ TRAINING	Name and Location of School	Did You Graduate ?	Subjects Studied
High School			
College			
Other Training (particularly that led to license or certification)			

Are or do you plan on taking additional training/educational courses? If so, what? _____

SKILLS / ABILITIES:

List any machines you are skilled in using: _____

List any skills or abilities you have which are pertinent to the position, including hobbies or related interests: _____

JOB REQUIREMENTS

Will you be able to perform the essential functions of the job, with or without reasonable accommodation?

Yes No

PLEASE LIST WORK EXPERIENCE, INCLUDING MILITARY AND VOLUNTEER EXPERIENCE

Present or Last Employer:

Address: _____ Phone: ()

Start Date: _____ Leaving Date: _____ Supervisor: _____

Job Title & Duties: _____

Why Did You Leave? _____

Previous Employer:

Address: _____ Phone: ()

Start Date: _____ Leaving Date: _____ Supervisor: _____

Job Title & Duties: _____

Why Did You Leave? _____

Previous Employer:

Address: _____ Phone: ()

Start Date: _____ Leaving Date: _____ Supervisor: _____

Job Title & Duties: _____

Why Did You Leave? _____

PERSONAL REFERENCE

Name: _____ Phone: ()

Address: _____

Occupation: _____ How Long Known: _____

Note: Pursuant to the Immigration Reform and Control Act, all new employees must present acceptable documents verifying identity and authorization to be employed in the United States.

AUTHORIZATION and CERTIFICATE

I hereby certify that the statements made on this application are correct. I also certify that I have read the job description and can perform the essential job functions, with or without reasonable accommodation. I understand inclusion of a false or misleading statement is grounds for rejection of my application or for termination from Cobalt, if I am employed. Further, I hereby authorize Cobalt to obtain background information on my history relevant to this position including contact with past employers, schools, references, driving record, any social media and criminal convictions. I release Cobalt Enterprises and my previous employers from all liability in connection with the release of such information, and hold harmless Cobalt, its officers, and employees from any claim or loss arising from such release.

Signature _____ Date _____

(Application will remain active for 30 days)