



P.O. Box 6929
Clovis, NM 88102
P 575.763.1150 F 575.763.1155

Date _____

APPLICATION FOR EMPLOYMENT

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex national origin, age, marital status, or non-job disability.

(Answer all questions-Please print clearly)

Name (last, first, middle) _____

Social Security # _____

Current address (street, city, state, zip code) _____

If less than 3 years at residence listed above, please list all other states of residence.

Are you 21 years of age or older? _____ Can you prove age? _____

Date of Birth _____ Have you been employed with us before: _____

Are you currently employed? _____ May we contact employer? _____

If not currently employed, when was you last day worked? _____

Have you ever been denied a license, permit or privilege to operate a motor vehicle? _____

Has any license, permit, or privilege been suspended or revoked? If yes, when and why? _____

Have you ever been convicted of a felony? _____



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Work Experience

List last three employers beginning with the most recent.

Company _____ Position _____

Company Address _____
Street City State Zip

Supervisor _____ Employment Dates: _____ to _____
From To

Reason(s) for leaving _____

Company _____ Position _____

Company Address _____
Street City State Zip

Supervisor _____ Employment Dates: _____ to _____
From To

Reason(s) for leaving _____

Company _____ Position _____

Company Address _____
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Supervisor _____ Employment Dates: _____ to _____
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Accident record for last 3 years (regardless of fault)

Date	Nature of Accident	Fatalities	Injuries	Preventable	Chargeable

Traffic convictions and forfeitures for the past 3 years

Location	Date	Charge	Penalty

Experience and Qualifications
List all drivers' licenses you have had in the last 3 years.

State	License#	Type	Expiration Date	Endorsements

Highest grade completed

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 16+

I certify that I have read and understood all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I relase employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered job it may be conditioned on the results of a physical examination and drug test.

If hired I agree to abide by all the rules and policies of employer.

This certifies that this application was completed by me, and all entries on it and information in it are true and complete to the best of my knowledge.



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I hereby authorize **CMB Garage Doors** to obtain information regarding my past employment history. Information may include dates of employment, scope of employment, safety information, previous two years drug and alcohol test as required as required by DOT regulations and workers ' compensation records. I hold any provider of such information harmless and non-liable.

Permanent Telephone #'s _____

Alternate Permanent Telephone # (family member etc...) _____

Date: _____

Applicant's Name (print clearly): _____

Applicant's Signature: _____