

Main Showroom & Design Studio 7356 N Oracle Rd Tucson, AZ 85704 520.297.2828 ROC102021 Corporate Office & Screen Manufacturing 500 E 27th Street Tucson, AZ 85713 520.798.1294

# TucsonRollingShutters.com

				DATE		
Name						
	Last		First		Middle	
Present address						
	Number	Street		City	State	Zip
		Email Address				
			Social S	Security No.		
	e for work?		Position	Applying for?		
How many hours of	can you work weekly? _		Pay Des	sired		
Referred by			Day or N	Night shift?		
Have you ever app	olied or worked here be	efore?	Can you	I work weekends?	>	

Schools	Graduate?	NAME OF SCHOOL	LOCATION	DATE/YEAR COMPLETED	MAJOR
High School					
GED					
College					
Trade School					

HAVE YOU EVER BEEN CONVICTED OF A FELO	□ Yes							
If yes, explain number of conviction(s), nature of offense.								
DO YOU HAVE A VALID DRIVER'S LICENSE?	🗆 Yes	🗆 No						
DO YOU HAVE A CLEAR DRIVING RECORD?	🗆 Yes	🗆 No						
DO YOU HAVE TRANSPORATION TO WORK?	🛛 Yes	🗆 No						
Driver's License #			State of issue					
Operators Commercial (CDL) Cł	nauffeur		Expiration date					



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Name	Name	
Position	Position	
Company	Company	
Address	Address	
Telephone	Telephone	
		_
Work Experience Please list you	r past work experience beginning with your most recent job held. If you were	self-

employed, give the business name. Attach additional sheets if necessary.						
**May we contact your present/Previous employer?	❑ Yes	⊐ No				
Business Name	Name of last supervisor	Employment dates	Pay or salary			
Address		From	Start			
City, State, Zip		То	Final			
Phone number	Previous Title					
Reason for leaving (be specific)						
List your responsibilities						

Business Name	Name of last supervisor	Employment dates	Pay or salary			
Address		From	Start			
City, State, Zip		То	Final			
Phone number	Previous Title					
Reason for leaving (be specific)						
List your responsibilities						

Business Name	Name of last supervisor	Employment dates	Pay or salary			
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City, State, Zip		То	Final			
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Business Name	Name of last supervisor	Employment dates	Pay or salary			
Address		From	Start			
City, State, Zip		То	Final			
Phone number	Previous Title					
Reason for leaving (be specific)						
List your responsibilities						

Typing	□ Yes □ No	WPM	10-key	□ Yes □ No	Word Processing	□ Yes □ No	WPM
Computers	□ Yes □ No	PC Mac	Programs Software				-
Other skills	we should	consider					

#### **APPLICATION WAIVER**

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact.

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant\_\_\_\_\_ Date: \_\_\_\_\_

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications. We do not share your information with anyone outside TRSS for any reason.

Thank you for completing this application form and for your interest in our business.



TucsonRollingShutters.com

#### Stop! Do Not Fill This Section

POST EMPLOYMENT INFORMATION FORM				
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY				
Name	Telephone			
Address	Relationship			

	TO BE COMPLETED BY EMPLOYER ONLY			
Date of employment	Job title	_ Dept		
Location	Rate of pay	_ Full-time	Part-time	Salaried
Drug test confirmation number				
Hired By				
Interviewed By				
Additional Comments				