SEABREEZE ALUMINUM PRODUCTS
Your Local Window and Door Provider

SeaBreeze Aluminum.
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EMPLOYMENT APPLICATION

Applicant Information

Full Name: _____ Date: _____
         Last   *First*   *M.I.*

Address: _____
     Street Address   *Apartment/Unit #*

_____
     City   *State*   *ZIP Code*

Phone: _____ E-mail Address: _____

Date Available: _____ Clean Driver License: _____ Desired Salary: $ _____

Position Applied for: _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever been convicted of a felony? YES ☐ NO ☐ If yes, explain (use space below if needed):

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Previous Employment

Company: _____ Phone: (___) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: $ _____ Ending Salary: $ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐ _____

Company: _____ Phone: (___) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: $ _____ Ending Salary: $ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: (___) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: **$** _____ Ending Salary: **$** _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐ _____

Skills

Skills: _____ Tape?: _____ Drill?: _____

Add'l. tool knowledge: _____ Supervision skills: _____

Prof. Licenses or certifications: _____

References

Please list three personal references who are not relatives or former supervisors

Full Name: _____ Relationship: _____

Address: _____ Phone: (___) _____

Email: _____

Full Name: _____ Relationship: _____

Address: _____ Phone: (___) _____

Email: _____

Full Name: _____ Relationship: _____

Address: _____ Phone: (___) _____

Email: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in immediate termination.

Signature: _____ Date: _____