

MEGAWATTS

3501 S. Sheridan Road, Tulsa, OK 74145
918-664-MEGA (6342)
fax: 918-663-6340

Job Application

Application Date _____

Personal Information

Last Name _____

First Name _____

Phone (Home) _____

Phone (Other) _____

Address _____

City, State Zip _____

Position Desired

Position Desired _____

Date Available _____

Salary Desired _____

Have you applied here before?

Yes If so, date and position applied for _____

No

Can you, after employment, submit verification of your identity?

Yes No

Employment type desired?

- Full-time
 Part-time (indicate days/hours)
 Temporary
 Internship
 Summer

Are you 18 years of age or older?

Yes No

If under age 18, do you have a work permit?

Yes No

What prompted you to apply here?

- Advertisement
 Referral
 Agency
 Other

If hired, will you sign a noncompete, nondisclosure agreement?

No Yes

Any Medical condition that would prevent you from lifting 60 pound boxes?

Yes No

Skills

Indicate any of the following skills

- Typing _____ wpm
 Word Processing
 Database
 Accounting
 Purchasing
 Spreadsheet

List Specific Computer Skills _____

Other Skills _____

Have you ever been convicted of a felony?

Yes No

Will you take a test to detect illegal drug use?

No Yes

Education and Training

School	Major	Date	Degree

Other Training, Honours, and Awards

Experience

	Most Recent Employer	Previous Employer	Previous Employer
Company	<hr/>	<hr/>	<hr/>
Address	<hr/>	<hr/>	<hr/>
Supervisor name	<hr/>	<hr/>	<hr/>
Supervisor phone	<hr/>	<hr/>	<hr/>
Your job title	<hr/>	<hr/>	<hr/>

	Job Description	Job Description	Job Description
	<hr/>	<hr/>	<hr/>
	<hr/>	<hr/>	<hr/>
	<hr/>	<hr/>	<hr/>
	<hr/>	<hr/>	<hr/>
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	<hr/>	<hr/>	<hr/>
Reason for leaving?	<hr/>	<hr/>	<hr/>
Dates Employed	<hr/>	<hr/>	<hr/>
Salary	<hr/>	<hr/>	<hr/>

References

	First Reference	Second Reference	Third Reference
Name	<hr/>	<hr/>	<hr/>
Relationship	<hr/>	<hr/>	<hr/>
Phone	<hr/>	<hr/>	<hr/>
Address	<hr/>	<hr/>	<hr/>

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for termination. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

Signature

Date