

# Application for Employment

Universal Tank & Fabrication is an Equal Opportunity Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

**Please save this PDF to your computer first (or print out) then complete as thoroughly as possible.**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Other names under which you have attended school or been employed: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you legally able to work in the United States?  Yes  No

Will you now or in the future require Universal Tank & Fabrication to commence (Sponsor) an immigration case in order to employ you?  Yes  No

Are you 18 years of age or older?  Yes  No  
If no, what is your current age? \_\_\_\_\_

Are you a military veteran?  Yes  No  
If yes, dates of active duty: \_\_\_\_\_ to \_\_\_\_\_

Have you ever applied for a position at Universal Tank before?  Yes  No  
If yes, when and what position: \_\_\_\_\_

Have you ever been employed at Universal Tank before?  Yes  No  
If yes, when and reason for leaving: \_\_\_\_\_

Are you related to any current Universal Tank employee?  Yes  No  
If yes, their name and relationship to you: \_\_\_\_\_

If required for position, do you have a valid driver's license?  Yes  No  
If yes, state of issuance, license # and expiration date: \_\_\_\_\_

How did you learn about this employment opportunity? Select all that apply:  
 Ad in newspaper  Ad on radio  Walk-in  Access Dubuque  Website  
 Employee referral If so, name of employee: \_\_\_\_\_  
 Other: \_\_\_\_\_

Position Applying for: \_\_\_\_\_  
Date you can start: \_\_\_\_\_  
Wage desired: \_\_\_\_\_  
Available to work:  Full-time  Part-time  Shift work

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## EDUCATION

High School: \_\_\_\_\_  
City & State: \_\_\_\_\_  
Did you graduate?  Yes  No  
If no, years left to graduation: \_\_\_\_\_  
If yes, date of graduation: \_\_\_\_\_

College: \_\_\_\_\_  
City & State: \_\_\_\_\_  
Did you graduate?  Yes  No  
If no, years left to graduation: \_\_\_\_\_  
If yes, date of graduation: \_\_\_\_\_

GED:  Yes  No

Other School: \_\_\_\_\_  
City & State: \_\_\_\_\_  
Did you graduate?  Yes  No  
If no, years left to graduation: \_\_\_\_\_  
If yes, date of graduation: \_\_\_\_\_

Other credentials / licenses / professional affiliations, etc., which are relevant to the job(s) for which you are applying: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Skills (technical, clerical, trade, etc.) which are relevant to the job(s) for which you are applying. Include relevant computer systems and software of which you have a working knowledge and note your level of proficiency (basic, intermediate, expert): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## WORK EXPERIENCE

Please detail your entire work history. Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position separately. Attach additional sheets if necessary. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. **PLEASE NOTE:** Universal Tank & Fabrication reserves the right to contact all current and former employers for reference information.

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_  
 Full-time  Part-time If part-time, # hrs./wk: \_\_\_\_\_  
Title: \_\_\_\_\_  
Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_  
Organization Name: \_\_\_\_\_  
Organization Address: \_\_\_\_\_  
Supervisor's Name, Title and Phone: \_\_\_\_\_  
Other Reference Name, Title and Phone: \_\_\_\_\_  
Contact my references:  At any time  Only if I am a final candidate  
Primary Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_  
 Full-time  Part-time If part-time, # hrs./wk: \_\_\_\_\_  
Title: \_\_\_\_\_  
Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_  
Organization Name: \_\_\_\_\_  
Organization Address: \_\_\_\_\_  
Supervisor's Name, Title and Phone: \_\_\_\_\_  
Other Reference Name, Title and Phone: \_\_\_\_\_  
Contact my references:  At any time  Only if I am a final candidate  
Primary Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

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Dates Employed: \_\_\_\_\_ to \_\_\_\_\_  
 Full-time  Part-time If part-time, # hrs./wk: \_\_\_\_\_  
Title: \_\_\_\_\_  
Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_  
Organization Name: \_\_\_\_\_  
Organization Address: \_\_\_\_\_  
Supervisor's Name, Title and Phone: \_\_\_\_\_  
Other Reference Name, Title and Phone: \_\_\_\_\_  
Contact my references:  At any time  Only if I am a final candidate  
Primary Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

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Please provide any additional information about your abilities or interests that make you a good candidate for this position: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**PLEASE READ CAREFULLY AND CONFIRM THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.**

I certify that the information on this application is accurate and complete. I understand and agree that misrepresentation or omission of facts represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Universal Tank & Fabrication to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this application is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. If employed I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first ninety days of regular employment represent a provisional period, during which I may be terminated without Right of appeal.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_