



APPLICATION FOR EMPLOYMENT WITH AIR DALLAS INSTRUMENTS, INC.

811 OFFICE PARK CIRCLE * LEWISVILLE, TEXAS 75057 * 972-221-7414 * FAX 972-436-8114
(PRE-EMPLOYMENT QUESTIONNAIRE) * (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

Date: _____

NAME	LAST	FIRST	MIDDLE	E-MAIL ADDRESS
PRESENT ADDRESS	STREET	CITY	STATE	ZIP
PERMANENT ADDRESS (IF DIFFERENT)	STREET	CITY	STATE	ZIP
PHONE/CELL NO.	ARE YOU 18 YEARS OR OLDER? YES <input type="checkbox"/> NO <input type="checkbox"/>			
ARE YOU EITHER AN U.S. CITIZEN OR AUTHORIZED TO WORK IN THE UNITED STATES?				YES <input type="checkbox"/> NO <input type="checkbox"/>

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED \$
ARE YOU EMPLOYED NOW?	IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?	
EVER APPLIED TO THIS COMPANY BEFORE?	WHERE?	WHEN?
REFERRED BY:		

EDUCATION	NAME AND LOCATION OF SCHOOL	DID YOU GRADUATE?	IF NO YEARS ATTENDED	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE OR BUSINESS SCHOOL				
OTHER				

GENERAL SPECIAL SKILLS

TELL A LITTLE ABOUT YOURSELF PERSONAL INTEREST, HOBBIES, ECT.

U.S. MILITARY OR NAVAL SERVICE	RANK	PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES
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PLEASE INITIAL BOTH BELOW STATING THAT YOU UNDERSTAND

_____ AIR DALLAS WILL DO A BACKGROUND CHECK ON ALL NEW HIRES.

_____ THE FAA REQUIRES PEOPLE WORKING IN THE SERVICE DEPARTMENT TO TAKE A DRUG TEST PRIOR TO WORKING AT AIR DALLAS INSTRUMENTS. YOU ARE ALSO REQUIRED TO RANDOM DRUG TESTING DURING THE TIME OF EMPLOYMENT AT AIR DALLAS.

SIGNATURE

TODAY'S DATE

(CONTINUED ON NEXT PAGE)

FORMER EMPLOYERS (LIST BELOW THREE EMPLOYERS, STARTING WITH LAST ONE FIRST).

DATE MONTH AND YEAR FROM	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
TO				
FROM				
TO				
FROM				
TO				

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU. WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	PHONE NUMBER	BUSINESS/RELATIONSHIP	YEARS ACQUAINTED
1)			
2)			
3)			

IN CASE OF
EMERGENCY NOTIFY

NAME

ADDRESS

PHONE NO.

" 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 DISMISSAL.

I AUTHORIZE INSTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE. AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE. "

The age discrimination in Employment Act of 1987 prohibits discrimination based on age with respect to individuals who are at least 40 years of age.

DATE SIGNATURE

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: DATE:

REMARKS:

NEATNESS ABILITY

HIRED YES ☐ NO ☐ POSITION DEPT.

SALARY/WAGE DATE REPORTING TO WORK

APPROVED: 1) EMPLOYMENT MANAGER 2) DEPT. HEAD 3) GENERAL MANAGER