

3215 West Loop 820 South P/ 817.738.9161 Fort Worth, Texas 76116 F/ 817.738.9163

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Applicant Information							
Full Name:	Last Fil	rst		M.I.	Date:		
Address:	Street Address				Apartment/Unit ‡	<u> </u>	
	Sueet Address				ŕ		
	City			State	Zip Code		
Phone:			Ema	ail			
Date Available: Social Secu		Security	No.:		Desired Salary: \$		
Position App	plied for:						
Are you legally authorized to work in the U.S.?		YES	NO	Will you, now or in the sponsorship for emp	ne future, require loyment visa status?	YES	NO
Have you ever worked for this company?			NO	If yes, when?			
Have you e	ver been convicted of a felony?	YES	NO	If yes, explain?			
If selected for employment are you willing to submit to a background check?		YES	NO				
			Edu	cation			
High School:			ess:				
	Did you graduate?	YES	NO	Diploma:			
College: Ado		Addre	ess:				
	Did you graduate?	YES	NO	Degree:			



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		Refere	ences			
Please list three p	professional refe	erences.				
Full Name:					Relationship:	
۰				_	Phone:	
Full Name:					Relationship:	
Company:					Phone:	
Full Name:					Relationship:	
A -1 -1					Phone:	
		Previous E	mployme	ent		
Company:					Phone:	
1 - 1 - T:41					Supervisor:	
Responsibilities: _						
From:	_ To:	Reason for Lea	-			
May we contact yo	ur previous supe	ervisor for a reference?	YES	NO 		
Company:					Phone:	
lob Title:					Supervisor:	
Responsibilities: _						
From:						
May we contact yo	ur previous supe	rvisor for a reference?	YES	NO		
Company:					Phone:	
Address:					Supervisor:	
Responsibilities: _						
From:	_ To:	Reason for Lea	ving:			
May we contact yo	ur previous supe	rvisor for a reference?	YES	NO		



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	Military Service	
Branch:	From:	To:
Rank at Discharge:	Type of Discharge:	
If other than honorable, explain:		
	Disclaimer and Signature	
I certify that my answers on this applica	ation are true and complete to the best of my	knowledge.
I understand that any employment results. Av-DEC can terminate the employment	ulting from this application will be at-will emplo t relationship at any time.	oyment, meaning that either I o
	I understand that false or misleading information other time may result in my release from em	
Signature:		Date: