



PO Box 265  
 709 Second Ave  
 Duncansville, PA 16635  
 Phone: (814) 695-9239  
 Fax: (814) 696-9323

**APPLICATION FOR EMPLOYMENT**  
**Metzler Bros. Tank Truck and Trailer, Inc.**

Name: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_  
 Social Security No.: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_  
 Present Address: \_\_\_\_\_

**Desired Employment**

Position: \_\_\_\_\_ Date Available for Work: \_\_\_\_\_ Salary Desired: \_\_\_\_\_  
 Are you employed now? \_\_\_\_\_ If so, may we inquire of your present employer? \_\_\_\_\_  
 Ever applied to this company before? \_\_\_\_\_ Where? \_\_\_\_\_ When? \_\_\_\_\_  
 Ever worked for this company before? \_\_\_\_\_ Where? \_\_\_\_\_ When? \_\_\_\_\_  
 Reason for leaving? \_\_\_\_\_

Name of last supervisor at this company: \_\_\_\_\_

Who referred you to this company? (Circle One)			
Employment Agency	Newspaper	Friend	Walk In
State Employment Office	College Placement Service	Other	

**Education and Training**

	YES	NO
Elementary School: _____ Completed: _____		
Jr. High School: _____ Completed: _____		
High School: _____ Completed: _____		
College/Major: _____ Completed: _____		
Tech School/Major: _____ Completed: _____		
Other Skills and Training: _____		

**Former Employers**

List below last three employers, starting with the most recent one first:

1. Name of present employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Start Date: \_\_\_\_\_ Leave Date: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Weekly starting salary: \_\_\_\_\_ Weekly final salary: \_\_\_\_\_ May we contact? \_\_\_\_\_  
 Name of Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

2. Name of previous employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Starting Date: \_\_\_\_\_ Leaving Date: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Weekly starting salary: \_\_\_\_\_ Weekly final salary: \_\_\_\_\_ May we contact? \_\_\_\_\_  
 Name of supervisor: \_\_\_\_\_ Title: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Description of work: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving? \_\_\_\_\_  
 \_\_\_\_\_

3. Name of previous employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Starting Date: \_\_\_\_\_ Leaving Date: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Weekly starting salary: \_\_\_\_\_ Weekly final salary: \_\_\_\_\_ May we contact? \_\_\_\_\_  
 Name of supervisor: \_\_\_\_\_ Title: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Description of work: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving? \_\_\_\_\_  
 \_\_\_\_\_

**Service Record**

Branch of Service: \_\_\_\_\_  
 Date Entered: \_\_\_\_\_ Date Discharged: \_\_\_\_\_  
 Rank: \_\_\_\_\_

**Criminal Record**

Have you been convicted of a felony within the past five years? \_\_\_\_\_  
 If yes, explain. (This will not necessarily exclude you from consideration) \_\_\_\_\_  
 \_\_\_\_\_

**References**

1. Name:	Address:	Phone:	Years Acquainted:
2. Name:	Address:	Phone:	Years Acquainted:
3. Name:	Address:	Phone:	Years Acquainted:

**Authorization**

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 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.

I also understand and agree that no representative of the company has any authorization to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is writing and signed by an authorized company representative.

\_\_\_\_\_  
 Signature Date