PLEASE PRINT



2710 Lakeview Court, Fremont, California 94538 Phone: (510) 656-5898 Fax: (510) 656-7779 E-Mail: ptx@pantronix.com



Prospective employees will receive consideration without discrimination because of race, color, sex, age, religion, national origin, or disability status.

NAME: LAST		FIRST	MIDDLE	DATE:	DATE:		
ADDRESS: STREET				SOCIAL SECURITY	NUMBER		
CITY	STATE		ZIP	PHONE			
E-MAIL	 NIL			CELLPHONE	CELLPHONE		
POSITION DESIRED		MINIMUM SALAI	RY YOU WILL ACCEPT	DATE YOU CAN ST	ART WORK		
		\$					
SHIFT PREFERENCE		TYPE OF EMPLO	TYPE OF EMPLOYMENT DESIRED		CAN YOU CHANGE YOUR WORK HOURS/DAYS? YES NO		
DAY SWING GRAVE ANY		FULL TIME [PART TIME ON	PART TIME ON-CALL WILL YOU WORK OVERTIME IF AS			
			luave v				
HOW DID YOU LEARN OF TH	IS OPENING?			OU EVER BEEN EMPLOYE	ED HERE?		
			IF YES,	GIVE DATES:			
Р	REVIOUS EMPLO		R LAST FOUR JOBS Please complete in d	HELD, MOST RECENT letail.)	FIRST		
EMPLOYER JOB TITLE AND DEPARTMENT				START	END		
		oos mee and servatiment			MONTH YEAR		
EMPLOYER ADDRESS	DUTIES	-	-	MONTH YEAR START RAT			
				\$ Per	\$ Per		
				REASON FOR LEAV	VING		
TELEPHONE #					1		
EMPLOYER	JOB TITLE A	AND DEPARTMENT		START	END		
				MONTH YEAR			
EMPLOYER ADDRESS	DUTIES	-	-	START RAT			
				\$ Per	\$ Per		
				REASON FOR LEAV	VING		
TELEPHONE #							
EMPLOYER	JOB TITLE A	AND DEPARTMENT		START	END		
				MONTH YEAR	R MONTH YEAR		
EMPLOYER ADDRESS	DUTIES			START RAT	TE END RATE		
				\$ Per	\$ Per		
				REASON FOR LEAV	√ING		
TELEPHONE #							
				START			
EMPLOYER	JOB TITLE A	JOB TITLE AND DEPARTMENT			END		
	-: 17150			MONTH YEAR			
EMPLOYER ADDRESS	DUTIES			START RAT			
				\$ Per	\$ Per		
				REASON FOR LEAV	√ING		
TELEPHONE #							
							
We may contact the emplo	-	-			CONTACT		
indicate those you do not v	want us to contact	í.	Employ	/er Re	eason		

EDUCATION	NAME & LOCATION OF SCHOOL	# of Years Attended	Did You Graduate?	Grade Pt. Average	Major Subjects Degrees Received				
HIGH SCHOOL		1 1 1 2 2			<u> </u>				
COLLEGE									
GRADUATE SCHOOL									
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL									
SUBJECT OF SPECIAL STUDY	OR RESEARCH								
Have you ever had any job related training in the United States military? If Yes, please describe Can you legally work in the United States? Proof of citizenship or immigration status will be required upon employment.									
I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision I understand that neither this document nor any offer of employment from the company constitute an employment contract unless a specific document to that effect is executed by the employer and employee in writing. This application is current for 90 days only. At the conclusion of this time, if the applicant has not heard from the Employer and still wishes to be considered for employment, it will be necessary to fill out a new application In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. Signature of Applicant Date									
PANTRONIX USE ONLY									
REMARKS									
			_						
HIRED Yes Department Start Date	No Position Beginning Pay Rat \$ Per	e Supe	rvisor	Corporate	e Approval				