



Application for Employment

An Equal Opportunity Employer

Del Rio Enterprises, Inc. is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

Date _____

Applicant Information

Please print or type and fill in all sections

Applicant full legal name (as it appears on drivers license) _____

Current Address _____

Social Security Number _____ - _____ - _____ Date of Birth _____ - _____ - _____

Home Phone Number (_____) _____ - _____ Cell Phone Number (_____) _____ - _____

E-Mail Address (optional) _____

How were you referred to Del Rio Enterprises, Inc.? _____

Employment Positions

Position(s) you are applying for _____

Are you applying for:

Temporary work such as summer or holiday? Yes No

Regular part time work? Yes No

Regular full time work? Yes No

What days and hours are you available for work? _____

If hired, on what date can you start working? _____ - _____ - _____

Are you available to work weekends? Yes No

Are you available to work evenings? Yes No

Are you available to work overtime? Yes No

Are you willing to travel for work? Yes No

Salary desired: \$ _____

Personal Information

Do you have a valid driver's license in the state of New Mexico? Yes No

If yes, please provide driver's license # _____

If you have a valid driver's license from another state please provide below the issuing state and driver's license number.

Issuing state of driver's license _____ License # _____

Do you have a clean driving record? Yes No

Has your driver's license ever been revoked or suspended? If yes, please explain Yes No

Have you ever applied to or worked for Del Rio Enterprises, Inc. before? Yes No

If yes, please explain (include dates): _____

Do you have any friends, relatives or acquaintances working for Del Rio Enterprises, Inc.? Yes No

If yes, please give name and relationship: _____

If hired, would you have transportation to/from work? Yes No

Are you over the age of 18? (If under the age of 18, hire is subject to verification of minimum legal age.)

Yes No

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? Yes No

Are you willing to take a pre-employment drug test and random drug tests during employment?

Yes No **we require random drug testing during employment.**

Are you able to perform the essential functions of the job for which you are applying, either without or with reasonable accommodation? Yes No

If no, please describe the function(s) that cannot be performed _____

(Note: Company complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

Have you **EVER** been arrested, charged or convicted in connection with a criminal offense (felony or misdemeanor)? Yes No

If yes, please describe the charge(s) – state nature of the crime(s), when and where convicted, and disposition of the case. If dismissed please indicate and give dismissal date.

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

For statistical purposes, please check the box for the racial or ethnic group with which you identify

White

Hispanic

Black

Asian/Pacific Islander

Native American/Alaskan Native

For statistical purposes, please check the appropriate box

Male Female

Education, Training and Experience

High school

School name _____

School address _____

Number of years completed (please circle) 1 2 3 4

Did you graduate? Yes No

Can you provide a copy of your high school diploma? Yes No

College/University or Vocational school

School name _____

School address _____

Number of years completed (please circle) 1 2 3 4 Other _____

Did you graduate? Yes No

If yes, please specify concentration: _____

Military

Branch: _____

Rank in military: _____

Total years of service: _____

Skills/duties: _____

Related details: _____

Do you have an OSHA 10 hour safety training card? Yes No

Do you have any other experience, training, qualifications, or skills which you feel should be brought to our attention, in the case that they make you especially suited for working with us? Yes No

If yes, please explain: _____

References

Please list below three persons who have knowledge of your work performance within the last five years. Please include professional references only.

Name (first, last): _____

Telephone number (_____) _____ - _____

Occupation: _____

Number of years acquainted: _____

Name (first, last): _____

Telephone number (_____) _____ - _____

Occupation: _____

Number of years acquainted: _____

Name (first, last): _____

Telephone number (_____) _____ - _____

Occupation: _____

Number of years acquainted: _____

Employment History

Are you currently employed? Yes No

If yes, may we contact your present employer? Yes No

Please provide name and phone number: _____

Begin with present or most recent job. List your last four (4) jobs in order. Do not omit any job.

Employment Experience 1:

Employer

Supervisor's Name

Address: _____

Job position: _____

Length of employment (include dates): _____

Telephone number: (____) _____ - _____

Starting/ending salary: _____

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

Employment Experience 2:

Employer

Supervisor's Name

Address: _____

Job position: _____

Length of employment (include dates): _____

Telephone number: (____) _____ - _____

Starting/ending salary: _____

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

Employment Experience 3:

Employer _____ Supervisor's Name _____

Address: _____

Job position: _____

Length of employment (include dates): _____

Telephone number: (____) _____ - _____

Starting/ending salary: _____

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

Employment Experience 4:

Employer

Supervisor's Name

Address: _____

Job position: _____

Length of employment (include dates): _____

Telephone number: (____) _____ - _____

Starting/ending salary: _____

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving: _____

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will result in refusal to hire or immediate discharge, if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications. YES NO

If hired, I will be responsible for familiarizing myself with all rules and regulations of **Del Rio Enterprises, Inc.** as they presently exist or are later modified. *If hired, I understand my employment can be terminated, at the discretion of the company or at my option, without notice, at any time, except as specifically set forth in writing in a current individual employment agreement, which I may have entered into with the company.* YES NO

I also understand that no representative of **Del Rio Enterprises, Inc.** has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically states in a current written agreement signed by the President. YES NO

I understand this application is not an offer of employment and no promises or representations or employment have been made to me at this time. YES NO

By signing below, I authorize **Del Rio Enterprises, Inc. or its agents** to investigate all statements contained in this employment application, as they may deem necessary in arriving at an employment decision. I further authorize **Del Rio Enterprises, Inc. or its agents** to order one or more consumer reports containing financial, driving record, criminal record, and/or other information about me from a consumer-reporting agency or law enforcement. I understand that the consumer and/or law enforcement report(s) will be requested and used for the purpose of evaluating me for employment, promotions, transfers, and/or retention as an employee.

I have read, understand, and agree with the above.

Signature of Applicant

Date

NOTICE BEFORE ORDERING CONSUMER OR LAW ENFORCEMENT REPORT(S)

This is to inform you that as a part of our procedure for evaluating your employment application or employment status, we may obtain from a consumer-reporting or law enforcement agency one or more consumer or law enforcement reports containing financial, driving record, criminal record, and/or other relevant information about you. These reports, if obtained, will only be used for the purpose of evaluating you for employment, promotions, transfers, and/or retention as an employee. The Fair Credit Reporting Act (FCRA) provides individuals with rights regarding consumer reports, and places certain obligations on employers using consumer reports for employment-related purposes.

Del Rio Enterprises, Inc. or its agents will not obtain a consumer report or criminal record without your signed authorization, however applications without a signature will not be considered. The authorization is contained above the signature line on the *Application for Position*. By signing the application, you are authorizing **Del Rio Enterprises, Inc. or its agents** to obtain one or more consumer reports or criminal records.

I hereby acknowledge that I have read and understand the contents of this notice and by signing the *Application for Position*, have signed my authorization for **Del Rio Enterprises, Inc. or its agents** to obtain one or more consumer reports or criminal records for the purposes listed above.

Printed Name

Signature

Date

This application is valid for only ninety (90) days from the date signed. If I want to be considered for job openings more than ninety (90) days from the date signed, I will submit a new application.