



1501 Front Street • P.O. Box 790
Morgan City, LA 70381

EMPLOYMENT APPLICATION

Selection for employment is based on occupational qualification without regard to race, color, religion, sex, age, national origin, disability, military status or status as a disabled veteran or veteran of the Vietnam era.

Name: (First) _____ (M.I.) _____ (Last) _____ **Social Security #** _____

Address: _____ **Phone Number:** _____

City, State, Zip _____ **Referred by:** _____

Are you legally eligible for employment in the U.S.? Yes No
 Are you 18 yrs or older? Yes No
 Have you ever applied for employment with Conrad Industries, Inc. (If yes, date?) Yes No ____/____/____
 Do you have any relatives employed by Conrad Industries, Inc.? Yes No (If yes, give dates, position, location)

NOTIFY IN CASE OF EMERGENCY: (Name) _____ (Address) _____ (Phone) _____

Position: _____ **Experience with:** (Please Circle) **STEEL OR ALUMINUM** **Salary Desired:** _____

Education:

School	Name and Location	Major	Graduate	Degree
High School			Yes / No	
College			Yes / No	
Technical			Yes / No	
Graduate or			Yes / No	
Military			Yes / No	

List Licenses/Certificates and Degrees related to the position sought: _____

Criminal History:

Have you ever been convicted of a felony? Yes No
 Have you ever been convicted of a felony or misdemeanor other than a Class C misdemeanor? Yes No
 Have you ever pleaded no contest to a criminal charge, other than a Class C? Yes No
 Have you ever been or are currently a defendant in a criminal proceeding? Yes No
 Have you ever been placed on probation or received deferred adjudication in any criminal matter, other than Class C? Yes No
 If you answered yes to any of the preceding questions, state the offense, location, and disposition.

NOTE: Answering any of these questions in the affirmative will not automatically disqualify the applicant from consideration for employment. The seriousness and date of the crime will be considered.

Service in the U.S. Armed Forces:

Branch	Highest Rank	Dates : From - To

Briefly describe duties and training: _____

WORK EXPERIENCE

List ALL employment for at least the past 10 years, beginning with most current, even if it does not relate.

Company:			Position:		
Address: (No. & St.)		(City)	(State)	(Zip Code)	
Date Started:	Date Left:	Starting Salary:	Ending Salary:		
Supervisor's Name:	Supervisor's Title:	Phone Number:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Description of job duties:					
Reason for leaving:					

Company:			Position:		
Address: (No. & St.)		(City)	(State)	(Zip Code)	
Date Started:	Date Left:	Starting Salary:	Ending Salary:		
Supervisor's Name:	Supervisor's Title:	Phone Number:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Description of job duties:					
Reason for leaving:					

Company:			Position:		
Address: (No. & St.)		(City)	(State)	(Zip Code)	
Date Started:	Date Left:	Starting Salary:	Ending Salary:		
Supervisor's Name:	Supervisor's Title:	Phone Number:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Description of job duties:					
Reason for leaving:					

CLERICAL SKILLS

Type? <input type="checkbox"/> Yes <input type="checkbox"/> No	Words/ Min:
Dictation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Words/ Min:
List office machines you can operate:	

Please read the following:

- I certify that this application was completed by me, and the information provided on this application and any attachments are to the best of my knowledge true and correct, and that I have not withheld any pertinent information.
- I understand that any omission, misrepresentation or false information submitted in connection with this application may result in refusal of or immediate dismissal from employment.
- I understand that employment with the company may be contingent upon my successful completion of a physical examination, including a drug screen, or other examination assessing my capability to perform job functions.
- I authorize persons, schools, licensing agencies, current and previous employers, and organizations named herein and on any accompanying resume to provide Conrad Industries, Inc., or any investigator working on its behalf with relevant information for use as all liability for any injury or damage that may result from the furnishing of information to Conrad Industries, Inc. concerning me or any action Conrad Industries, Inc. takes on the basis of such information. I authorize Conrad Industries, Inc. to check my background for felony convictions.
- If employed, I agree to the rules and regulations of Conrad Industries, Inc. and I understand my employment can be terminated at any time, with or without cause or notice, at my option or at the option of Conrad Industries, Inc. Noting herein constitutes an express or implied contract assurance of employment.

DATE:	SIGNATURE:
-------	------------

Below For Office Use Only

Hired	For Dept.	Position:	Start Salary
Approved: 1	2	3	
HR Manager	Gen. Manager	Supervisor	