



**EUSTIS ENGINEERING
 METAIRIE, LOUISIANA
 LAFAYETTE, LOUISIANA
 GULFPORT, MISSISSIPPI**

PERSONAL INFORMATION

Date of Application _____ Social Security Number _____

Name _____
Last First Middle

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Home Phone Number _____ Cell Phone Number _____

Referred By _____ Are You 18 Years of Age or Older? Yes No

EMPLOYMENT DESIRED

Position	Date You Can Start	Salary Desired
Are You Currently Employed? Yes <input type="checkbox"/> No <input type="checkbox"/>	If So, May We Inquire of Your Present Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Ever Applied with Eustis Before? Yes <input type="checkbox"/> No <input type="checkbox"/>	Where? When?	

EDUCATION

	Name & Location of School	Circle Last Year Completed	Did You Graduate?	Subjects Studied & Degree Received
Grammar School	_____		Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
High School	_____	1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
College	_____	1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
Trade, Business, Correspondence	_____	1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____

GENERAL

Subjects of Special Study or Research Work:

Job Related Skills (Typing, Driver's License, Etc.):

Activities Other than Religious (Civic, Athletic, Etc.):

FORMER EMPLOYERS (Starting with Last or Current Employer)				
Dates Month/Year	Name & Address of Employer	Salary (Upon Leaving)	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

REFERENCES (Three Persons Not Related to You Whom You Have Known at Least One Year)			
Name	Phone Number	Relationship	Years Acquainted

If you are to be hired by Eustis Engineering Services, L.L.C., you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume. I authorize former employers and references to disclose information regarding my former employment, character, and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers, and all references listed above from any and all claims, demands, or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand my employment or continued employment, to the extent permitted by law is contingent upon a satisfactory medical examination and drug test. If I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies, and procedures. The Company retains the right to revise its policies and procedures, in whole or in part, at any time.

Signature

Date
