

EMPLOYMENT APPLICATION



2294 Old 431 Hwy.
Owens Crossroads • AL • 35763
256.725.2500 • www.TaraPools.com

The application must be fully completed to be considered with a position at Tara Pools.
(Please print or type) Complete each section, even if you attach a resume.

PERSONAL INFORMATION

Name

First _____ Middle _____ Last _____

Address

City _____ State _____ Zip _____

Phone Number

() -

Email

Are you legally eligible to work in the US?

Yes No

Are you a Veteran?

Yes No

Are you willing to submit to a background check?

Yes No

Are you willing to submit to a pre-employment drug screening?

Yes No

POSITION

Position you are applying for

Available start date

Month / Day / Year

Desired pay

\$

Employment desired

Full-Time Part-Time Seasonal Temporary

EDUCATION

Please circle one.	High School Name	Location (City /State)	Diploma/GED Received		Graduation Date		
			Yes	No	Month	Day	Year
			Yes	No	Month	Day	Year
	College Name	Location (City /State)	Years Attended	Degree Obtained		Major	
				Associates	Masters		
				Bachelors	Other		
				Associates	Masters		
				Bachelors	Other		

REFERENCES (PROFESSIONAL ONLY)

Name (First & Last)	Relationship	Years Known	Phone	Email
			() -	
			() -	
			() -	

EMPLOYMENT HISTORY

1 Employer	Job Title	Dates Employed ____/____ - ____/____ Month / Year Month / Year
Address		
City	State	Zip
Employer's Name (First & Last)	Phone () -	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason For Leaving	Starting Pay \$	Ending Pay \$

2 Employer	Job Title	Dates Employed ____/____ - ____/____ Month / Year Month / Year
Address		
City	State	Zip
Employer's Name (First & Last)	Phone () -	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason For Leaving	Starting Pay \$	Ending Pay \$

3 Employer	Job Title	Dates Employed ____/____ - ____/____ Month / Year Month / Year
Address		
City	State	Zip
Employer's Name (First & Last)	Phone () -	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason For Leaving	Starting Pay \$	Ending Pay \$

SIGNATURE DISCLAIMER

I CERTIFY THAT MY ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. IF THIS APPLICATION LEADS TO EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION IN MY APPLICATION OR INTERVIEW MAY RESULT IN MY EMPLOYMENT BEING TERMINATED.

Name (Please Print)

First	Middle	Last
Signature		Today's Date (Month / Day / Year)

THANK YOU!
If you would like to email your resume please send to
cbounds@taramfg.com