

Application for Employment
Central Tank Coatings, Inc.
22528 Canoe Road
Elgin, Iowa 52141
Phone: 563-426-5967 Fax: 563-426-5641
Email: ctcinc@alpinecom.net

**This is NOT a home every night job
Pre-employment Drug Testing Required**

Date of Application: _____

Full Name: _____

Address: _____

Telephone: _____

Cell Phone: _____

Date of Birth: _____

S.S. Number: _____

Email: _____

Emergency Contact:

Name: _____

Address: _____

Phone: _____

Relationship: _____

Emergency Contact:

Name: _____

Address: _____

Phone: _____

Relationship: _____

Emergency Contact:

Name: _____

Address: _____

Phone: _____

Relationship: _____

Have you ever been convicted of a felony? _____ Explain

Have you sandblasted before? _____

Do you have any experience in painting? _____

Can you weld? _____

Do you have a welding certificate? _____

Any other related training? _____

Do you have a CDL? _____

Can you travel? _____

Are you able to climb a water tower? _____

Do you have previous safety training? _____ What type? _____

When was the training done? _____

Do you have a current Driver's License? _____

Do you have current transportation? _____

Position applying for? _____

When could you start here? _____

Are you currently employed? _____

If so may we contact your employer? _____

Previous Employment:

Company: _____

Address: _____

Supervisor: _____

Phone: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Reason for leaving: _____

Start Date: _____ Date Ended: _____

Company: _____

Address: _____

Supervisor: _____

Phone: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Reason for leaving: _____

Start Date: _____ Date Ended: _____

Company: _____

Address: _____

Supervisor: _____

Phone: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Reason for leaving: _____

Start Date: _____ Date Ended: _____

References: please list three non-family references

Name: _____

Address: _____

Phone: _____

Relationship: _____

Name: _____

Address: _____

Phone: _____

Relationship: _____

Name: _____

Address: _____

Phone: _____

Relationship: _____

Authorization:

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application will be grounds for dismissal.

Employee Signature:

_____ Date: _____