

**THE BYRON COMPANY****APPLICATION FOR EMPLOYMENT**

6050 Delmar Blvd.  
 St. Louis, MO 63112  
 314-725-5757

ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A HANDICAP, OR ANY OTHER LEGALLY PROTECTED STATUS.

NAME \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Position Sought: \_\_\_\_\_ How did you learn about the position? \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_ Desired Wage/Salary \$ \_\_\_\_\_

Are you a U.S. citizen, or are you otherwise authorized to work in the U.S. without any restriction? [ ] Yes [ ] No

Have you ever been convicted of a felony? [ ] Yes [ ] No If yes, please describe circumstances: \_\_\_\_\_

Have you ever been involuntarily terminated or asked to resign from any position of employment? [ ] Yes [ ] No

If yes, please describe circumstances: \_\_\_\_\_

Are you presently employed? [ ] Yes [ ] No If yes, may we contact your present employer? [ ] Yes [ ] No

Do you have a valid driver's license? [ ] Yes [ ] No Are you able to drive a stick-shift vehicle? [ ] Yes [ ] No

Do you have any physical limitations or concerns? [ ] Yes [ ] No If yes, please describe \_\_\_\_\_

**EDUCATION**

School Name	Location	From / To	Degree Received	Major

List skills / other info pertinent to the employment: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**EMPLOYMENT (List Most Recent First)**

1. Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Dates Employed \_\_\_\_\_ to \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Supervisor \_\_\_\_\_

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Duties Performed \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

(continued)

2. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ to \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

3. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ to \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

4. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ to \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

#### REFERENCES

List two (2) references, excluding relatives, who have knowledge of your work experience:

NAME	TELEPHONE NUMBER	RELATIONSHIP
1. _____	_____	_____
2. _____	_____	_____

#### ACKNOWLEDGMENT AND AUTHORIZATION

I certify that the facts contained in this application are true and complete and understand that, if employed, any false statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and give The Byron Company (TBC) permission to request any and all information concerning my previous employment, personal character, qualifications, and any additional information, personal or otherwise, which TBC considers relevant to this application and the job. And further, I agree to hold all harmless from any and all liability of whatsoever nature on account of furnishing such information. I also agree that a full transcript of my record as an employee, such as information as to my personal character, habits, and ability and also the cause of my leaving TBC may be given to any person with whom I may hereinafter seek employment. I hereby release TBC from any and all liability for damages of whatsoever nature by reason of the furnishing of such information. I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time without prior notice. I ACCEPT THAT THE FIRST THREE MONTHS OF SERVICE ARE A PROBATIONARY PERIOD, AND THAT DURING THAT PERIOD I MAY BE DISMISSED WITHOUT NOTICE.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date