



Industrial Power, Inc.
 635 Sweeden Rd.
 Russellville, AR 72802
 Ph: 479-498-2001 Fax: 479-498-2197
 www.industrialpowerinc.net

Employment Application

IPI does not discriminate in employment opportunities or practices on the basis of race, color, religion, sex, national origin, age, disability, or any other characteristic protected by law.

Position applying for: _____ Date _____

 First Name Middle Initial Last Name

Current Address:

 Street and Apt # City State Zip Code

Permanent Address (if different from above):

 Street and Apt # City State Zip Code

Home Phone: _____ Cell Phone: _____

Driver's License #: _____ State: _____ License Revoked: Yes or No

I am a US citizen or otherwise authorized to work in the US on an unrestricted basis: Yes or No

If you are under 18, can you furnish a work permit if it is required? Yes No or N/A

If applicable list visa type, # and expiration: _____

Have you ever been convicted of a felony? Yes or No

If yes please explain: _____

How did you hear about this job? _____

What Hours are you willing to work? _____

Would you be able to work weekends? Yes or No

Would you be willing to travel? Yes or No

When would you be able to start? _____

Desired rate of pay: _____ per _____

Type of employment desired: _____ full-time _____ part-time _____ temporary

Are you able to perform the essential functions of the job you are applying for? Yes or No



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EDUCATION:

High School

Name and Address

Did you graduate? Yes or No _____ Attended from _____ to _____

If you did not graduate, did you receive your GED? Yes or No _____

Special honors or awards: _____

Technical or Vocational School

Name and Address

Did you graduate? Yes or No _____ Attended from _____ to _____

Degree or Certification: _____ Trade: _____

Special honors or awards: _____

College or University

Name and Address

Did you graduate? Yes or No _____ Attended from _____ to _____

Degree: _____ Major: _____

Special honors or awards: _____

College or University

Name and Address

Did you graduate? Yes or No _____ Attended from _____ to _____

Degree: _____ Major: _____

Special honors or awards: _____

SKILLS

Please list any skills: _____



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EMPLOYMENT HISTORY

Present or Most Recent Employer

Employer: _____ Address: _____
 Your position: _____ Rate of pay: _____
 Duties: _____
 Dates of employment from _____ to _____
 Supervisor's name: _____ May we contact? Yes or No
 Reason for leaving: _____

Prior Employer

Employer: _____ Address: _____
 Your position: _____ Rate of pay: _____
 Duties: _____
 Dates of employment from _____ to _____
 Supervisor's name: _____ May we contact? Yes or No
 Reason for leaving: _____

Prior Employer

Employer: _____ Address: _____
 Your position: _____ Rate of pay: _____
 Duties: _____
 Dates of employment from _____ to _____
 Supervisor's name: _____ May we contact? Yes or No
 Reason for leaving: _____

Prior Employer

Employer: _____ Address: _____
 Your position: _____ Rate of pay: _____
 Duties: _____
 Dates of employment from _____ to _____
 Supervisor's name: _____ May we contact? Yes or No
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I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: _____ Date: _____