APPLICATION FOR EMPLOYMENT



Please answer all questions. Resumes are not substitute for completed application. *Please print clearly.*

	Р	PERSONAL INFORM	MATION				
Position Applied For Today's Date							
Name	first, last						
	first, last						
Present Address	Street, Apartment or Uni	City it Number		State	Zip		
	a lived at this address?						
					(optional)		
Are you a U.S. Citi	zen? Yes No	If no, are you authoriz	ed to work in the	e U.S? Yes	□ No		
Desired Salary / H	Desired Salary / Hourly Rate \$ Date you can begin working if hired						
If under the age of	18, can you produce the nece	ssary work certificate at the ti	me of employme	ent? Yes	□ No □ N/A		
Type of employment desired							
Are you available t	to work any shift? Yes	☐ No Preferred Shi	ift 🗌 1st 🗀] 2nd			
	ely applied for employment wi						
•	n employed by this company? es of employment, location and		mployment				
	ny other names by which you l. For example, change of nam						
How did you hea	ar about us?						
How did you hear about us? Do you know anyone who works for our company? Yes No If yes, who?							
		55.1.6.4.71.6.1					
EDUCATION							
Education		e and Location , State, Zip)	Graduate? Yes or No	# of Years Completed	Degree/Major		
High School							
College or University							
Business/Tech- nical/Trade							
Other							
Honors/ Awards/ S	Special Training Received		•	. '			

WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or most recent employer listed first. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military experience.

1.	1						
Employer Name	Type of Business						
Employer Address	City	State	Zip				
Employer Phone #	Supervisor's Name						
Reason for leaving		_ May we contact?	Yes No				
2.							
Employer Name	Type of Business	·					
Employer Address	City	State	Zip				
Employer Phone #	Supervisor's Name						
Reason for leaving		May we contact?	☐ Yes ☐ No				
3.							
Employer Name	Type of Business						
Employer Address	City	State	Zip				
Employer Phone #	Supervisor's Name						
Reason for leaving		_ May we contact?	Yes No				
REF	ERENCES						
Please list the names of work-related reference we may contact. Individu $\boxed{1.}$	-	nay list school or volunteer-	related references.				
Name Po	osition	Telephone					
Company Wo	ork Relationship	(e.g. Supervisor, Co-	wantan)				
2.		(e.g. Supervisor, Co-	workery				
	osition	_ Telephone					
Company Wo	ork Relationship	(e.g. Supervisor, Co-	worker)				
FourShare LLC (dba Battery Watering Technologies) is an equal opportunity empservice member status, race, color, religion, sex, national origin, age, physical or n state, or local laws.							
THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE APPLICATION, IF HIRED, THE COMPANY MAY TERMINATE THE EMPLO CAUSE OR NOTICE.							
This application will be considered active for a maximum of sixty (60) do I certify that all of the information that I have p			you must reapply.				
DO NOT SIGN UNTIL YOU HAVE READ ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION.							
I HAVE READ AND UNDERSTOOD THIS APPLICATION							
Applicant Name		Date Signed					