

AG|CM EMPLOYMENT APPLICATION

Please complete the entire application.

1. Employer Information:

Employer: AG|CM, Inc.
Address: 1101 Ocean Drive
City/State/ZIP: Corpus Christi, Texas 78404
Telephone: 361-882-0469

It is the policy of AG|CM, Inc. to provide equal employment opportunities to all applicants and employees without regard to race, color, religion, gender, national origin, age, disability, veteran status, sexual orientation or any other legally protected status.

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire

2. Applicant Information:

Applicant Full Name: _____
Mailing Address: _____
City/State/ZIP: _____
Daytime Phone: _____ Evening Phone: _____
Email Address: _____
Driver's License: State: _____ Number: _____
Type: Class A ____ Class B ____ Class C ____ Other _____

3. Job Position Applied for: _____
Full or Part Time/ _____

4. Who referred you to our company? _____

5. Are you at least 18 years old? ____ Yes ____ No

6. Are you legally eligible for employment in the United States? ____ Yes ____ No

7. If you are offered employment, when would you be available to begin work?

8. Have you ever been convicted of a felony, public indecency or a violation of the Texas controlled substances act, or have you ever pled guilty or no contest to a criminal act, or have you been placed on probation or had your driver's license suspended or revoked, or been notified of any exclusion or sanctioning by a federal program? Yes ____ No ____

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Note: A positive response to any part of the question will not necessarily bar you from being considered for employment. AG|CM will consider the offense for which you were convicted, the circumstances surrounding the conviction and the date of the conviction as important factors in making a hiring decision.

If your answer to any of the above is "Yes", please provide details, including dates below:

9. Applicant Skills: List any skills that may be useful for the job you are seeking. Enter the number of years of experience, and the number which corresponds to your ability for each particular skill. (1 = poor ability, while 5 = exceptional ability)

Skill	Years of Experience	Rating
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. Applicant Employment History:

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of the application.

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Phone No: _____ Reason for Leaving: _____

Dates of Employment (Month/Year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Phone No: _____ Reason for Leaving: _____

Dates of Employment (Month/Year): _____

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Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Phone No: _____ Reason for Leaving: _____

Dates of Employment (Month/Year): _____

11. Applicant Education and Training:

College/University Name and Address _____

Did you receive a degree Yes _____ No _____ If yes, degree(s) received: _____

High School/GED Name and Address: _____

Did you graduate? Yes _____ No _____

Other training (graduate, technical, vocational): _____

Please indicate any current professional licenses or certifications that you hold and any awards, honors or special achievements: _____

Military Service: Yes _____ No _____ Branch: _____

Specialized Training: _____

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12. References:

Please provide two professional references (former employer, manager, supervisor, or as a last resort, a co-worker) who can verify your experience and qualifications to perform the job you have applied for.

Reference #1:

Name and title: _____

Contact Phone No.: _____

Company: _____

Your dates of employment: _____

Position you held: _____

Reason for leaving: _____

Reference #2:

Name and title: _____

Contact Phone No.: _____

Company: _____

Your dates of employment: _____

Position you held: _____

Reason for leaving: _____

13. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer. _____

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Application Statement:

I certify that the answers given are true and complete to the best of my knowledge. I hereby certify that there are not willful misrepresentations, omissions or falsifications in the foregoing statements and answers to questions. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is an "at will" nature. This means that the employee may resign at any time and that the employer may discharge the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive or this organization specifically acknowledges such change in writing.

I am fully aware that my misrepresentations, omissions, or falsifications given in my application or interview(s) will be grounds for immediate rejection of my application, or if hired, termination of my employment. I understand, also, that I am required to abide by all rules and regulations of the employer, AG|CM, Inc.

Signature

Print Name

Date