



2610 State Hwy 31 West  
Athens, Texas 75751  
(903) 675-3240 Fax: (903) 675-7837

APPLICATION FOR EMPLOYMENT

**AN EQUAL OPPORTUNITY EMPLOYER**

(PLEASE PRINT)

Date Of Application: \_\_\_/\_\_\_/\_\_\_ Position(s) Applying for: \_\_\_\_\_

Salary Desired: \_\_\_\_\_

NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

Last First Middle

ADDRESS:

Number Street City State Zip

If employed and you are under 18, can you furnish a work permit? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you filled an application here before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If **YES** give date: \_\_\_\_\_

Have you ever been employed here before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If **YES** give date: \_\_\_\_\_

Are you employed now? \_\_\_\_\_ Yes \_\_\_\_\_ No

May we contact your present employer? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? \_\_\_\_\_ Yes \_\_\_\_\_ No

**(PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT)**

On what date would you be available to start work if hired? \_\_\_\_\_

Are you available to work \_\_\_\_\_ FT \_\_\_\_\_ PT \_\_\_\_\_ TEMP

Have you been convicted of a felony within the **last 7 years**? \_\_\_\_\_ Yes \_\_\_\_\_ No

**(CONVICTION WILL NOT NECESSARILY DISQUALIFY APPLICANT FROM EMPLOYMENT)**

If YES please explain: \_\_\_\_\_

EDUCATION: \_\_\_\_\_ YEARS COMPLETED

High School: \_\_\_\_\_

College/University: \_\_\_\_\_

Are you able to lift up to 50 lbs? Y \_\_\_\_\_ N \_\_\_\_\_

Are there any physical restrictions you have for lifting, bending, kneeling, squatting or climbing? Y\_\_ N\_\_

Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities: \_\_\_\_\_

Honors Received: State any additional information YOU feel maybe helpful to us in considering your application: \_\_\_\_\_

Give name, Address, and telephone number of **3 professional references** who are **NOT** related to you:

1. Name \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_
2. Name \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_
3. Name \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_

**EMPLOYMENT EXPERIENCE:**

Start with your present or last job. Including military services, assignments and volunteer activities. You may exclude organization names, which would reveal sex, race, religion, national origin, age, ancestry, handicap, or other protected status:

1. \_\_\_\_\_

Employer	From/To	Telephone
Address	Salary	Position Held
Job Title	Work Performed	Reason Left
2. \_\_\_\_\_

Employer	From/To	Telephone
Address	Salary	Position Held
Job Title	Work Performed	Reason Left
3. \_\_\_\_\_

Employer	From/To	Telephone
Address	Salary	Position Held
Job Title	Work Performed	Reason Left
4. \_\_\_\_\_

Employer	From/To	Telephone
Address	Salary	Position Held
Job Title	Work Performed	Reason Left

Special skills and Qualifications: Summarize special skills and qualifications acquired from employment experience or education: \_\_\_\_\_

I certify that answers given herein are true and complete to the best of my knowledge. I authorize an investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment is considered active for a period of time not to exceed 180 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time. I understand that neither this document nor any offer of employment from the employer constitutes an employment contact unless the employer and I to that effect execute a specific document in writing. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the employer.

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Signature of Applicant

Date

<b>DO NOT WRITE BELOW THIS LINE. OFFICE USE ONLY</b>

(Please read and sign this form in the space provided below. Your written authorization is necessary for completion of the application process)

I, \_\_\_\_\_, hereby authorize Mud Technology International, Inc. to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that Mud Technology International will utilize an outside firm or firms to assist in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will NOT be processed further.

\_\_\_\_\_  
Employee Name - Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee Name – Printed

\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
DOB

# Pre-Employment Test

1.  $108 - 27 =$

2.  $111 - 57 =$

3.  $60 - 41 =$

4.  $225 + 48 =$

5.  $312 + 1052 =$

6.  $8 \times 41 =$

7.  $460 \times 12 =$

8.  $390 / 6 =$

9.  $240 / 12 =$

10. Look at the paper attached and write the measurements that has an arrow pointed towards them. (#: 23, 24, and 25)

Write your answers on the lines provided. Example: 1 1/4"

23. \_\_\_\_\_ 24. \_\_\_\_\_ 25. \_\_\_\_\_

