



Garrett Container Systems, Inc.

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Application for Employment

PLEASE COMPLETE ALL FIVE PAGES

PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

Date: _____

Name: _____
Last First Middle Maiden

Present Address: _____
Number Street City State Zip

How Long _____ Social Security No. _____
(Last 4 digits only)
Telephone Home (____) _____
Cell (____) _____ Email _____

Position applied for: _____
Expected salary
or hourly wage: _____

How many hours can you work weekly? _____

Employment desired: ___Full-time only ___Part-time only ___Full or Part-Time

Date available for work? _____

May we contact your present employer? ___Yes ___No

Have you ever been employed here before? ___Yes ___No

If no, how did you hear about this position?

Advertisement Indeed Company Website Other – Please describe: _____

Referred by Current Employee – Provide employee's name: _____

Do you have a legal right to be employed in the USA? ___Yes ___No

Educational Background

High School:

Name and Location _____

Did you graduate? ____ Yes or ____ No

Years Completed _____

College:

Name and Location _____

Course of Study _____ Did you graduate? ____ Yes or ____ No

Years Completed _____

Graduate School:

Name and Location _____

Course of Study _____ Did you graduate? ____ Yes or ____ No

Years Completed _____

Vocational or other training:

Name and Location _____

Course of Study _____ Did you graduate? ____ Yes or ____ No

Years Completed _____

Skills and Qualifications

Use the space below to list any other special training or skills that would benefit you in the job for which you are applying.

Computer Skills (Include software titles and years of experience.)

MS Word: _____ Years: _____

MS Excel: _____ Years: _____

Web research: _____ Years: _____

Web page design: _____ Years: _____

MS PowerPoint: _____ Years: _____

Outlook or Exchange: _____ Years: _____

Photo editing: _____ Years: _____

CAD/3D Modeling: _____ Years: _____

Employment Experience

Please list your work experience for the past ten years beginning with your **most recent** job held. If you were self-employed, give company name. Attach additional sheets if necessary.

1. Employer _____
Address _____
Position _____ Supervisor _____
Phone () _____ E-mail _____
Dates Employed: from (mm/yy) _____ to (mm/yy) _____
Hourly rate/salary: starting _____ final _____ (Optional)
Reason for Leaving _____

List jobs held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

2. Employer _____
Address _____
Position _____ Supervisor _____
Phone () _____ E-mail _____
Dates Employed: from (mm/yy) _____ to (mm/yy) _____
Hourly rate/salary: starting _____ final _____ (Optional)
Reason for Leaving _____

List jobs held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

3. Employer _____
Address _____
Position _____ Supervisor _____
Phone () _____ E-mail _____
Dates Employed: from (mm/yy) _____ to (mm/yy) _____
Hourly rate/salary: starting _____ final _____ (Optional)
Reason for Leaving _____

List jobs held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Do you have a driver's license? Yes No

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____ Exp. Date _____

Operator Commercial (CDL) Chauffeur

Have you had any accidents during the past three years? Yes No
If so, how many? _____

Have you had any moving violations during the past three years? Yes No
If so, how many? _____

Please list **two** references other than relatives or previous employers.

Name: _____

Position: _____

Company: _____

Address: _____

Telephone (____) _____

Name: _____

Position: _____

Company: _____

Address: _____

Telephone (____) _____