McCord Engineering, Inc. 916 Southwest Parkway East College Station, Texas 77840

APPLICATION FOR EMPLOYMENT

	Application Date:			
IDENTIFICATION:				
Name (Last, First, Middle):				
Address (Include Zip):				
Phone: Home ()	Work or Alternate Number ()			
Drivers License No. & State:	Email Address:			
Social Security Number:	*Date of Birth:			
*Marital Status:	*Spouse's Name:			
*Spouse's Employment:				
*Number of Children and Name	es and Ages:			
PERSONAL:				
Title of Specific Job for which y	ou are applying:			
Employment Desired:				
Permanent Temp	orary			
Full Time Part	Time (If part time, list days and hours that y	vou can work)		
If a student, what is your class	schedule:			
EDUCATION:				
Circle last year completed: Hig	gh School: 1 2 3 4 College: 1 2 3 4 5 6 7 8			
High School	Diploma: Yes	No		
High School located in: City	State			
College or University	Major Mino	or		
Degree	Grade Average: Overall	Major		
Anticipated Date of Graduation	(If not already):			
Business or Technical School:	Graduated?			
Other (Include Special Training	, Military Courses and Apprenticeships completed)			
Salary Desired:				
Date Available:				

^{*}Submission of this information is voluntary

Can you travel if a job requires it	?		
Office Machines and/or Equipme	ent Operated:		
Typing – WPM			
Drafting Work:			
Surveying Work:			
Computer Programming Work (L	.anguages):		
Spread Sheet Work:			
Word Processing Experience:			
Electric Power Distribution Work	<u> </u>		
<u> </u>	s not automaticall sentence, and all	ly mean you will	shall be interpreted to include all forms not be offered a job.) If yes, state the
Have you ever been disciplined to use of alcohol or drugs? If yes, of	give details.	ne influence of dru	ugs or alcohol or for the possession or
Have you ever been disciplined f			
	res	No	_
Have you ever been disciplined f	for failure to follow	w absence proced	dures? If yes, give details.
		No	
Llava vau avar baga disabligad f	for in our bounding atio		atolio.
Have you ever been disciplined f		n? If yes, give de No	
Are you a habitual smoker?	Yes	No	

Are you able to perform the essential treasonable accommodations?	functions of this job (if applying for a field position) with or without
	Yes No
REFERENCES: Persons familiar with your work or acade Name: Company:	Phone: Position:
Address:	
Name:	Phone:
Company:	
Address:	
Name:	
Company:	Position:
Address:	
	EMPLOYMENT DATA EGINNING WITH PRESENT OR MOST RECENT:
Name of Employer:	
Address:	
Kind of Business:	
	TO Month/Year
Your Job Title:	Immediate Supervisor:
Starting Salary per month:	Final Salary
If still employed, may we contact prese	ent employer?
Describe your responsibilities:	
	nange:
What do/did you like most about your jo	ob?
What do/did you least enjoy?	

Name of Employer: Address:	
	TO Month/Year
	Immediate Supervisor:
	Final Salary
	ent employer?
Describe your responsibilities:	
Reason(s) for Leaving or desiring to ch	nange:
ivnat do/did you like most about your j	ob?
Name of Employer:Address:	
Address:	
Address: Kind of Business:	Phone:
Address: Kind of Business: Date Employed FROM Month/Year	Phone:
Address: Kind of Business: Date Employed FROM Month/Year Your Job Title:	Phone: TO Month/Year
Address: Kind of Business: Date Employed FROM Month/Year Your Job Title: Starting Salary per month:	Phone: TO Month/Year Immediate Supervisor:
Address: Kind of Business: Date Employed FROM Month/Year Your Job Title: Starting Salary per month: If still employed, may we contact prese	Phone: TO Month/Year Immediate Supervisor: Final Salary
Address: Kind of Business: Date Employed FROM Month/Year Your Job Title: Starting Salary per month: If still employed, may we contact prese Describe your responsibilities:	Phone: TO Month/Year Immediate Supervisor: Final Salary ent employer?
Address: Kind of Business: Date Employed FROM Month/Year Your Job Title: Starting Salary per month: If still employed, may we contact prese Describe your responsibilities: Reason(s) for Leaving or desiring to ch	Phone: TO Month/YearImmediate Supervisor: Final Salary ent employer?

Name of Employer:
Address: Phone:
Kind of Business:
Date Employed FROM Month/Year TO Month/Year
Your Job Title: Immediate Supervisor:
Starting Salary per month: Final Salary
If still employed, may we contact present employer?
Describe your responsibilities:
Reason(s) for Leaving or desiring to change:
What do/did you like most about your job?
What do/did you least enjoy?
MEI is an equal opportunity employer and does not discriminate in hiring or employment practices on the basis of protected classification.
I understand that this application will be given every consideration, but its receipt does not imply that I will be employed. I authorize the firm or its duly authorized representative, to verify all statements contained in this application and to conduct any credit or background investigations deemed necessary.
In the event of my appointment to a position, I shall conform to firm policies and procedures. Should I accept a position with the firm, I will have the right to terminate my employment at any time for any reason. I agree that the firm reserves the same right.
It is understood and agreed that any misrepresentation, omission or false statement by me in this application will be sufficient cause for cancellation of consideration for employment or separation from the firm's service if I have been employed.
APPLICANT'S SIGNATURE:
DATE: