



110 Foss Way  
Troy, Ohio 45373  
Phone (937) 335-5784  
Fax (937) 339-6978

### Employment Application

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Phone \_\_\_\_\_ Positon Applying For \_\_\_\_\_  
Circle: Home / Cell / Other

Address \_\_\_\_\_  
Street City State Zip

Email \_\_\_\_\_ Social Security # \_\_\_\_\_

**Employment History** – List present & previous jobs, beginning with the most recent. If your job title or duties changed during employment with any one employer, please list as separate employers. You may attach a resume, but application must be completed.

Name and address of employer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_  
May we contact this employer?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Job Title \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_ Ending Salary \_\_\_\_\_

Describe Responsibilities \_\_\_\_\_  
\_\_\_\_\_

Name/Title of Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name and address of employer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_  
May we contact this employer?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Job Title \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_ Ending Salary \_\_\_\_\_

Describe Responsibilities \_\_\_\_\_  
\_\_\_\_\_

Name/Title of Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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Name and address of employer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_  
May we contact this employer?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Job Title \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_ Ending Salary \_\_\_\_\_

Describe Responsibilities \_\_\_\_\_

Name/Title of Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**Professional References** – Please list three references, excluding relatives, this agency has permission to contact.

	Name & Occupation	Address	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

**Record of Education**

	Name and Address of School	Last Year Completed	Graduated
High School	_____	_____	Yes ___ No ___
Other	_____	_____	Yes ___ No ___

**Miscellaneous**

1. Can you perform the essential functions of the specific job for which you are applying as listed in the Position Posting? Yes \_\_\_ No \_\_\_

If no, please list which essential function(s) you would have difficulty performing and identify possible accommodation(s): \_\_\_\_\_

2. Have you been convicted of any felony? Yes \_\_\_ No \_\_\_

3. Do you have valid driver's license and reliable transportation? Yes \_\_\_ No \_\_\_

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RT Industries does not discriminate in provision of services or employment because of race, color, religion, national origin, political affiliation, disability, marital status, sex, or age. We are an equal opportunity employer.

**Applicant's Agreement**

I certify that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief.

I understand that any false information, omission, or misrepresentations of fact provided in this application may result in rejection of my application or termination at any time during my employment. I understand that, as a condition of initial or continued employment, I agree to submit to examination, including medical, or substance testing as may be required by RT Industries.

I authorize RT Industries and/or its agents including consumer reporting bureaus, to verify any of the information I have provided by researching appropriate information and record sources. I authorize all employers (unless I noted in employment history), persons, schools, companies, law enforcement authorities and state agencies to release any information concerning my background and hereby release those parties from any liability for any damage whatsoever for issuing this information.

I understand and agree that as a condition of employment, I will meet and maintain all required standards of my position which involve certification, licensure, and training.

I grant permission to have this application and enclosures duplicated and distributed to RT Industries' employees responsible for initial screening, interviewing, and recommending applicants for employment and to employees responsible for personnel records and reports.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant