TLC Trades Labor Corporation

EMPLOYMENT APPLICATION

Date:_____   Employee Number:_____

LAST NAME   M.I.   FIRST NAME

_____
ADDRESS   CITY   STATE   ZIP CODE

_____
PHONE NUMBER   EMAIL   EMERGENCY CONTACT   RELATION / NAME

_____
BOOT SIZE   SHIRT SIZE   PREFERRED SHIFTS: ☐DAY SHIFT   ☐SWING SHIFT   ☐NIGHT SHIFT

_____
DAYS AVAILABLE FOR WORK

☐SUNDAY   ☐MONDAY   ☐TUESDAY   ☐WEDNESDAY   ☐THURSDAY   ☐FRIDAY   ☐SATURDAY
_____
ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB WITH OR WITHOUT REASONABLE ACCOMMODATION? COMMON ESSENTIAL FUNCTIONS INCLUDE LIFTING, AND CARRYING 35 LBS, CLIMBING, REACHING, CRAWLING, SITTING, STANDING, DRIVING, OPERATING MACHINERY.   ☐ YES   ☐NO

_____
DO YOU DRIVE A VEHICLE?   ARE YOU WILLING TO USE IT FOR WORK?
                    ☐YES   ☐NO   ☐YES   ☐NO
_____

PLEASE INDICATION ANY EXPERIENCE YOU HAVE IN THE FOLLOWING AREAS:

FUNCTION	YEARS EXP.	FUNCTION	YEARS EXP.
CONSTRUCTION LABOR		FLAGGING / TRAFFIC CONTROL	
CARPENTRY		WAREHOUSING	
MANUFACTURING		PRODUCTION	
FORKLIFT		SCISSOR LIFT / AERIAL LIFT	
RIGGING		MOVING	
LUMPING		STEVEDORING	

PLEASE LIST YOUR RECENT WORK HISTORY

EMPLOYER	POSITION TITLE	SUPERVISOR/CONTACT	DATES HELD
			-
			-
			-
			-

HAVE YOU WORKED FOR ANOTHER TEMPORARY EMPLOYMENT SERVICE, PLEASE INDICATE RECENT ASSIGNMENTS?

TEMP SERVICE	ASSIGNMENT	JOBSITE ADDRESS	SUPERVISOR	CONTACT NUMBER

PLEASE LIST ANY SPECIALTY CERTIFICATION, LICENCES, EDUCATION, TRAINING, AND AWARDS YOU HOLD:

DOCUMENT TITLE	DESCRIPTION

By signing below, I certify that the above information is accurate and correct to the best of my knowledge. I understand that any omissions or misrepresentations may result in immediate termination of my employment. I further authorize TLC to obtain references and release previous employers from all claims related to truthful information they may provide about my work and background. I further acknowledge that TLC operates on a day labor model and that if I wish to be eligible for work on a particular day, I will appear in person and place my name on the sign in sheet. I understand that I am not guaranteed work and that if I am not available if my name is called, work may go to another available employee regardless of name position on the sign in sheet.

Signature: _____   Date:_____

TLC is an equal opportunity employer and does not discriminate based on race, age, gender, religion, national origin, disability, pregnancy, sexual orientation including gender expression of identity or any other status as protected by law.