



Saint Jean Industries

Application for Employment

Remember to save or download your changes when finished.

Email completed application to danielle.stacks@st-ji.com

424 Industrial Park Road, Heber Springs, Arkansas 72543
501-362-9500 phone | 501-362-9539 fax

Check Position Applying For:

Date	<input type="checkbox"/> Quality/PQT <input type="checkbox"/> Casting <input type="checkbox"/> Forge <input type="checkbox"/> Heat Treat <input type="checkbox"/> Finishing <input type="checkbox"/> Machining <input type="checkbox"/> Mold Shop <input type="checkbox"/> Melt <input type="checkbox"/> Maintenance <input type="checkbox"/> Forklift <input type="checkbox"/> Office <input type="checkbox"/> Fluoroscope	Shifts Willing To Work: <input type="checkbox"/> 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd	Desired Salary:
Last Name:		First Name:	Middle:
Address:		Street:	City: Zip Code:
Primary Telephone:		Secondary or Message:	Additional Message:
() () ()			
Do you have the legal right to work in the United States? : Yes <input type="checkbox"/> No <input type="checkbox"/>		Are you at least 18 years of age? : Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are you able to perform the essential functions of the job for which you are applying, including working overtime (additional days per week or additional hours per day) ?: Yes <input type="checkbox"/> No <input type="checkbox"/> If No, please explain:			
Have you ever been convicted of a criminal offense? : No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, please complete: Convicted of: _____ Location: _____ Date: _____ Disposition/Sentence: _____ <i>Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense.</i>			
Please tell us how you were <u>referred</u> to Saint Jean Industries: (ie newspaper, employee (name), job agency, ect.)			
School	Name & Location	Graduate	Degree/Diploma
Last School Attended		<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other Training		<input type="checkbox"/> Yes <input type="checkbox"/> No	
MILITARY SERVICE			
Branch of Service:	Rank at Discharge:	Special Training Received:	Length of Service:
SKILLS			
Please list any manufacturing equipment & industrial machinery you have operated (power and air tools, CNC, ect.):			
Please list any skills, certifications, etc. that you have (ie, forklift, welding, boiler license, ect.):			
List computer <u>programs/software</u> with which you are familiar and level of skill (ie, beginner, proficient, expert):			

EMPLOYMENT HISTORY

Please give all information as detailed as possible. List most recent employment first.
(Please complete even if a resume is attached.)

Company Name:	Name of Supervisor	Telephone Number:
Address:		
Job Title:	Duties:	
Date Hired:	Last Day Worked:	Final Salary:
May We Contact?: <input type="checkbox"/> YES <input type="checkbox"/> NO	Reason for Leaving:	

Company Name:	Name of Supervisor	Telephone Number:
Address:		
Job Title:	Duties:	
Date Hired:	Last Day Worked:	Final Salary:
May We Contact?: <input type="checkbox"/> YES <input type="checkbox"/> NO	Reason for Leaving:	

Company Name:	Name of Supervisor	Telephone Number:
Address:		
Job Title:	Duties:	
Date Hired:	Last Day Worked:	Final Salary:
May We Contact?: <input type="checkbox"/> YES <input type="checkbox"/> NO	Reason for Leaving:	

Company Name:	Name of Supervisor	Telephone Number:
Address:		
Job Title:	Duties:	
Date Hired:	Last Day Worked:	Final Salary:
May We Contact?: <input type="checkbox"/> YES <input type="checkbox"/> NO	Reason for Leaving:	

References – List three business references (NON-RELATIVES)

<u>NAME:</u>	<u>ADDRESS:</u>	<u>PHONE NUMBER:</u>	<u>OCCUPATION:</u>
()			
Work Relationship to You:	<input type="checkbox"/> Coworker	<input type="checkbox"/> Supervisor/Owner	
()			
Work Relationship to You:	<input type="checkbox"/> Coworker	<input type="checkbox"/> Supervisor/Owner	
()			
Work Relationship to You:	<input type="checkbox"/> Coworker	<input type="checkbox"/> Supervisor/Owner	



Saint Jean Industries, Inc
424 Industrial Park Road
Heber Springs, AR 72543
Telephone: 501-362-9540
Fax: 501-362-9539

Employment Reference Consent and Release Form

Applicant Name: (please print) _____

SSN: XXX-XX-_____ DOB: _____

I hereby give consent to any and all prior employers of mine or my current employer, to provide the information below with regard to my employment to Saint Jean Industries, Inc. This consent is valid for a period of one year from the date indicated below.

Signature of Applicant: _____ Date: _____
Please type or sign full name.

Applicant, Please do not write below this line. For office use only.

The individual above has applied for employment with Saint Jean Industries, Inc. Please respond to the request of the information listed below and return your written response via fax or US Mail.

Please fax to : 1-501-362-9539

Or mail to:

Saint Jean Industries, Inc.
Attn: Human Resources
424 Industrial Park Rd.
Heber Springs, AR 72543

Dates of Employment: Start _____ End _____

Current or last rate of pay: _____

Current or last Job Title: _____

Did the employee comply with the attendance policies? YES or NO

Was his/her separation? VOLUNTARY or INVOLUNTARY

Is the applicant eligible for rehire? YES or NO

Printed name of person providing information _____

Signature _____ Date _____

Please read fully and type or sign name below:

It is understood and agreed the information provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interview, can be justification for refusal of employment, or, if employed, termination from Saint Jean Industries, Incorporated (hereafter referred to as "the Company") employ. I give the Company right to investigate all statements contained and to secure additional job related information. I also agree to hold any person contacted harmless with regard to any information that they may provide. I understand that the Company may conduct a full background check on all candidates considered for employment, I also understand that my employment is contingent on successful completion of a pre-employment screening for drugs and controlled substances. **Most of our positions have been designated as a "Safety Sensitive" positions because a person performing the duties of this position while under the influence of marijuana may constitute a threat to the health and safety of themselves or others.** Prior to testing, I agree to sign the Company's authorization forms wherein I will agree to submit to such testing and to authorize the release of the results to the Company. The substance testing will be conducted at the Company's expense by a provider selected by the Company. I understand that the Company is an Equal Opportunity Employer. The Company will not unlawfully discriminate in employment. Questions on this application will not be used to limit or exclude an applicant's consideration for employment on a basis prohibited by local, state, or federal law. In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of Saint Jean Industries, Inc. I understand that my employment and compensation can be terminated with cause or without cause or notice at any time. This policy cannot be changed except in writing and then only when signed by an authorized representative of the Company.

Print Applicant Name

Applicant Signature

Date of Signature

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