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## APPLICATION FOR EMPLOYMENT

Pre-Employment Questionnaire • An Equal Opportunity Employer

### Personal Information

Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Present Address: \_\_\_\_\_  
Street City State Zip

Permanent Address: \_\_\_\_\_  
Street City State Zip

Phone Number: \_\_\_\_\_ Are you 18 years or older? ☐ Yes ☐ No

Are you employed now? ☐ Yes ☐ No If Yes, ☐ Full Time or ☐ Part Time

May we inquire of your present employer? ☐ Yes ☐ No Referred to AIM/AOS by: \_\_\_\_\_

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Have you ever applied to AIM/AOS before? ☐ Yes ☐ No Where? \_\_\_\_\_ When? \_\_\_\_\_

### Education Information

Level of Education	Name & Location of School	No. of Years	Did You Graduate?	Subjects Studied
Grammar School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business or Correspondence School			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Subjects of Special Study or Research Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you able to perform the essential functions of the position for which you are applying, with or without reasonable accommodations?

☐ Yes ☐ No

In case of emergency notify: \_\_\_\_\_

Name

Address

Phone

### **Former Employers**

(List below your last four employers, starting with the last one first)

Date	Name & Address of Employer	Salary	Position	Supervisor	Reason for Leaving
From:					
To:					
From:					
To:					
From:					
To:					
From:					
To:					

### **References**

(Give below the names of three persons, not related to you, whom you have known at least one year)

Name	Address	Business	Years Acquainted
1)			
2)			
3)			

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that falsified statements on this application shall be grounds for denial or termination of employment.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that this application is not an offer or contract of employment, and that if hired, my employment is at will and is for no definite period, and may be terminated by the company or by me at any time, without cause or prior notice.

Signature

Date

### **Please Do Not Write Below This Line!**

Remarks: \_\_\_\_\_

Neatness		Character
Personality		Ability

Hired? ☐ Yes ☐ No Position \_\_\_\_\_ Dept. \_\_\_\_\_ Will Report \_\_\_\_\_ Salary \_\_\_\_\_