



JOB
APPLICATION

PO Box 685
Sheridan, WY 82801
(307) 673-9709

HAVE YOU EVER WORKED FOR TOMAHAWK, INC BEFORE? _____ YES _____ NO

NAME _____ STARTING WAGE _____

SOCIAL SECURITY # _____

PERMANENT ADDRESS _____ PHONE _____

CITY, STATE, ZIP _____

(IF DIFFERENT, OR FOR W-2) _____

DATE OF BIRTH _____ MARRIED SINGLE

DRIVERS LICENSE # _____ STATE _____ EXP. DATE _____

HEIGHT _____ WEIGHT _____ EYES _____ HAIR _____

AGE _____ VETERAN _____ GOOD HEALTH? _____

POSITION APPLIED FOR _____ DATE OF HIRE _____

DISABILITY? _____ WHAT ACCOMMODATIONS NEEDED? _____

LIST LAST THREE JOBS, ADDRESS, PHONE # AND POSITION HELD.

_____ PHONE _____ POSITION _____

_____ PHONE _____ POSITION _____

_____ PHONE _____ POSITION _____

LIST THREE REFERENCES, ADDRESS, PHONE #

REFERENCE _____ PHONE _____

REFERENCE _____ PHONE _____

REFERENCE _____ PHONE _____

NEXT OF KIN _____ RELATIONSHIP _____

THEIR ADDRESS _____

PHONE # _____

IN CASE OF EMERGENCY NOTIFY _____ RELATIONSHIP _____

PHONE # HOME _____ PHONE # WORK _____

I CERTIFY, ALL OF THE ABOVE INFORMATION IS CORRECT, TO THE BEST OF MY KNOWLEDGE.
ANY INFORMATION FALSELY REPORTED WOULD BE REASON FOR DISMISSAL.

SIGNATURE _____ DATE _____