



FLASHER Equipment Co

Main Office

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San Antonio, TX 78212
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Fax: 210-736-2084

75 CR 372
Jarrell, TX 76537
Phone: 512-746-4441
Fax: 512-746-4444

Job Application #: _____

For FEC Use Only	
Date received	_____
Time received	_____
Received by	_____

PRE-EMPLOYMENT APPLICATION

PRINT IN BLACK OR BLUE INK OR TYPE. These instructions must be followed exactly. Fill out application completely. If questions are not applicable, enter "NA." **Do not leave questions blank.** Resumes will not be accepted in lieu of applications. Flasher Equipment Company (FEC) is an Equal Opportunity Employer and does not discriminate on the basis of age, color, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, veteran status, or any disability as defined in the Americans with Disabilities Act, or for any other reason protected by Local, State or Federal law. This application becomes company record and is not subject to disclosure. With a few exceptions, you have the right to request and be informed about information that FEC collects about you. You also have the right to ask FEC to correct any information that is determined to be incorrect. This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

Name _____ (_____) _____
(Last) (First) (Middle) (Daytime Phone)

List any other name(s) used, if different from the name on this application _____

Home Address _____
(Street) (City) (State) (Zip) (County)

How long have you resided at this address? ____ month(s) ____ year(s)

Email: _____ Social Security # _____

List position, type of work, or Department(s) you wish to apply: _____

Do you have a relative(s) working for FEC? If yes, list name(s) and relationship _____

Date you would be available to work _____ Are you 18 years of age or older? ___Yes ___No

Do you have the ability to work overtime and/or travel out of town, if required? ___Yes ___No

If no, explain: _____

Valid Driver's License # _____ Commercial Driver's License (CDL) ___Class A ___Class B
(State) (Number)

Are you a citizen of the U.S. or do you have the legal right to be employed in the United States? ___Yes ___No

Are you subject to a non-compete, non-disclosure or confidentiality agreement, or any other type of agreement with any current or former employer(s) or organization(s) which would limit your ability to work for our company?

___Yes ___No If yes, explain: _____

You will be required to provide a copy of the agreement.



Pavement Markings • Traffic Control • Signs - Sales

Work History

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, provide company name and supply business references.

Have you ever been employed by Flasher Equipment Company? ___Yes ___No

If yes, provide department and position: _____

DO NOT REFERENCE YOUR RESUME

Name of Employer: Address: City, State, Zip Code:		Name and Title of Last Supervisor	Dates Employed		Pay
			From	To	Starting/Ending
			Mo: _____ Yr: _____	Mo: _____ Yr: _____	\$ _____ \$ _____
Telephone ()	Nature of Business	Reason for Leaving			
Title					

Describe duties performed, skills used/learned, advancements/promotions earned:

Name of Employer: Address: City, State, Zip Code:		Name and Title of Last Supervisor	Dates Employed		Pay
			From	To	Starting/Ending
			Mo: _____ Yr: _____	Mo: _____ Yr: _____	\$ _____ \$ _____
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			Mo: _____ Yr: _____	Mo: _____ Yr: _____	\$ _____ \$ _____
Telephone ()	Nature of Business	Reason for Leaving			
Title					

Describe duties performed, skills used/learned, advancements/promotions earned:

Education (Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certifications, etc.)

High School Graduate or GED? ___Yes___No If yes, list the name and location of High School or GED institute.

Type of School	Name & Location of School	Dates Attended		Date Graduated	Expected Graduation Date	Type of Diploma or Degree	Major/ Minor Fields of Study
		From Mo / Yr	To Mo / Yr				
Technical / Vocational School or College							

If a license or certificate is required or related to the position for which you are applying, complete the below - Examples: Flagger Certification, Traffic Control Technician, Supervisor Traffic Control Technician, Software Certification

Certificate	Date Issued	Date Expires	Issued by/Location of issuing authority (State or other authority) (City & State)	License # if applicable

Special Training/Skills/Qualifications: List all job-related training or skills you possess: i.e. printing or graphics equipment, types of computer software and hardware.

Do you speak a language other than English? (If required for this position) ___Yes___No

How Fluently? ___Fair___Good___Excellent

If yes, list other fluent language(s): _____

List any language(s) you write in other than English: _____

Military Service (A copy of a report of separation from the Armed Services may be required: DD Form 214)

Are you a veteran? ___ Yes ___ No

If yes, list type of discharge _____

Service Branch _____ Final Rank _____

Dates of Service: From: _____ To: _____

Capability / Reliability

Would you be willing and able to perform all of the tasks required by the job you are applying for? ___ Yes ___ No

If no, explain which tasks _____

Will you abide by the safety rules of this company? ___ Yes ___ No

Have you ever been disciplined for violating company safety rules or regulations? ___ Yes ___ No

Have you ever been fired, or asked to resign from a job? ___ Yes ___ No

If yes, explain _____

References

Provide three references - not relatives or former employers

Name	Address	Phone	Occupation

Applicant Signature _____ Date _____