



Application For Employment

We are an Equal Opportunity Employer.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name		Social Security	
Address	City	State	Zip
Phone Number	Email Address		
Are you legally eligible to work in the US? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you over the age of 18? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have a valid driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If selected for employment, background checks and drug testing is required. Are you willing to submit to this? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you able to work overtime, including weekends? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have reliable transportation to get to and from work? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Position

Position You Are Applying For	Available Start Date	Desired Salary
Type of Desired Employment <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Seasonal/Temporary	How did you hear about SCS?	If referred, by whom?
Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Have you worked at SCS before? Yes <input type="checkbox"/> No <input type="checkbox"/>	If so, when?	

Education

School Name	Location	Years Attended	Degree Received	Major

List all certifications, experience or other skills related to the position for which you are applying.

References (business and professional only)

Name	Title	Company	Phone

Employment History (List most recent employers first.)

Employer (1)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Reason for Leaving	Supervisor's Name	May we contact your previous supervisor? Yes <input type="checkbox"/> No <input type="checkbox"/>	

List job duties here.

Employer (2)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Reason for Leaving	Supervisor's Name	May we contact your previous supervisor? Yes <input type="checkbox"/> No <input type="checkbox"/>	

List job duties here.

Employer (3)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Reason for Leaving	Supervisor's Name	Yes <input type="checkbox"/> No <input type="checkbox"/>	

List job duties here.

Employment History (continued)

Employer (4)		Job Title	Dates Employed	
Work Phone		Starting Pay Rate	Ending Pay Rate	
Address		City	State	Zip
Reason for Leaving	Supervisor's Name		May we contact your previous supervisor? Yes <input type="checkbox"/> No <input type="checkbox"/>	

List job duties here.

Employer (5)		Job Title	Dates Employed	
Work Phone		Starting Pay Rate	Ending Pay Rate	
Address		City	State	Zip
Reason for Leaving	Supervisor's Name		May we contact your previous supervisor? Yes <input type="checkbox"/> No <input type="checkbox"/>	

List job duties here.

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my employment being terminated.

Name (Please Print)	Signature
Date	

Submit this application in person at 3423 I-20 Frontage Rd, Big Spring, TX or by emailing it as an attachment to HR@scstechnologiesllc.com. For questions or other inquiries, call (432) 264-6500.