

396281 WEST 3000 RD OCHELATA, OK 74051 PH: 918-535-2726 OR 866-689-8901 FAX: 918-535-3351

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Date_____

How did you learn about Lucas Metal Works?

Last Name		First Name		Middle Name	
Address	Number	Street	City	Zip Co	de
Telephone Num	ber(s)				
Have you ever fi	iled an application wi	th us before?		YES	NO
Are you current	ly employed?			YES	NO
May we contact	your present employ	yer?		YES	NO
	ed from lawfully bec ue to Visa or Immigra	oming employed ation Status?		YES	NO
On what date w	ould you be available	e for work?			
Are you availabl	e for work?Full	TimePart Time	eShift Wo	rkTemp	orary
Are you current	ly on "lay-off" status	and subject to recall?		YES	NO



Do you have your o	wn transportation?		. YES NO
EDUCATION:			
	NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED
Elementary			
High School			
Undergraduate			
Graduate			
Other (Specify)			

Describe any specialized training, apprenticeship, skills and/or extra-curricular activities you specialize in:

Describe any job related training received in the United States Military:

EMPLOYMENT HISTORY

Start with your present (or last) job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, national origin, disabilities or any other protected status.



1.	EMPLOYER:	
	ADDRESS:	PHONE:
	DATE OF EMPLOYMENT:	
	HOURLY RATE/SALARY:	
	JOB TITLE:	SUPERVISOR'S NAME:
	RFORMED:	
	REASON FOR LEAVING:	
2.	EMPLOYER:	
	ADDRESS:	PHONE:
	DATE OF EMPLOYMENT:	
	HOURLY RATE/SALARY:	
	JOB TITLE:	SUPERVISOR'S NAME:
		RFORMED:
	REASON FOR LEAVING:	
3.	EMPLOYER:	
	ADDRESS:	PHONE:
	DATE OF EMPLOYMENT:	
	HOURLY RATE/SALARY:	



	JOB TITLE:	SUPERVISOR'S NAME:
PLEASE DESCRIBE WORK		RK PERFORMED:
		G:
4.	EMPLOYER:	
	ADDRESS:	PHONE:
	DATE OF EMPLOYMEN	IT:
	HOURLY RATE/SALARY	(:
	JOB TITLE:	SUPERVISOR'S NAME:
PLEASE DESCRIBE WORK PERFORMED:		
		6:
	(If you require additio	nal space, please continue on a separate sheet of paper.)
Other	Qualifications:	
Summ experi		d skills and qualification acquired from employment or other



References:

1.		
	Name	Phone #
2.		
	Name	Phone #
3.		
	Name	Phone #

Explain how you would be an asset to this organization. Please list your qualities and what motivates you.

