

**Perkins Cinders, Inc.**  
**Perkins Aggregates, Inc.**  
 1950 E. Adams, Show Low, AZ 85901

Phone (928) 537-2008 Fax (928)537-2912

**Email: HR@perkinscinders.com**

**APPLICATION FOR EMPLOYMENT**

**Personal Information**

Date: \_\_\_\_\_

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

Address: \_\_\_\_\_  
                     Mailing                                    City                    State                    Zip

How long have you lived in this area? \_\_\_\_\_ Phone: \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? Yes  No

Are you 18 Years or older? Yes  No

Have you ever been convicted of a Felony? Yes  No   
 (answering yes will not necessarily disqualify you for consideration)

**Employment Desired**

Position: \_\_\_\_\_ Date you Can Start: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Are you employed now? Yes  No  May we contact them? Yes  No

Have you ever applied to this company before? \_\_\_\_\_ When? \_\_\_\_\_

Referred by: \_\_\_\_\_

Education	Name & Location	Years Attended	Graduate	Studied
Grammar School				
High School				
College				
Trade, Business or Correspondence School				

**General**

Subjects of special study or research work: \_\_\_\_\_

Special Skills: \_\_\_\_\_

Activities: (Civic, Athletic Etc.) \_\_\_\_\_

Exclude organizations, the name of which indicates the race, creed, sex, age, marital status, color or nation of origin of its members.

\*This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991

