



EMPLOYMENT APPLICATION

HEGG COMPANIES 1300 WEST 57TH STREET, SIOUX FALLS, SD

Hegg Compaines, Inc. is an Equal Opportunity Employer. Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or disabilities that do not prohibit performance of essential job functions. Applicants should not answer any questions on this form that they feel may violate federal, state or local law or that they feel are not related to the position.

PLEASE PRINT

Name: _____
Last First Middle

Address: _____
Street Apt. # City State Zip

Phone #: _____ Email: _____

How were you referred to our organization? _____

Do you have family that currently works for Hegg Companies? Yes No

If yes, please print their name(s): _____

Position(s) applied for: _____

Which of the following are you able to work: Full-Time Part-Time Days Nights Evenings Weekends

Date available for work: _____ Starting wage expected: _____

Do you meet the attendance requirements for the position? Yes No Are you over the age of 18? Yes No

Are you a U.S. Citizen? Yes No If no, enter registration number: _____

Have you ever been convicted of a misdemeanor or felony? Yes No

(A conviction in and of itself is not a decisive factor of hiring, but rather part of our company's due diligence procedure with regard to employment.)

If yes, please explain: _____

Are you currently employed? Yes No If so, may we contact your present employer? Yes No

Have you ever been bonded? Yes No Can you still be bonded? Yes No

Can you perform the essential functions of the position(s) for which you are applying? Yes No

If no, please explain: _____

EMPLOYMENT HISTORY

Please list employment history for the last ten years in order, starting with your present or last position first. If you need additional space, please continue on the back of this form. Please account for all periods, including unemployment.

Employer	Dates Employed		Work Performed: Duties, Skills Used / Learned
	From	To	
Address (include city & state)			
Phone	Rate of Pay		
	Start	End	
Job Title			
Supervisor			
Reason for Leaving			May we contact this employer?

Employer	Dates Employed		Work Performed: Duties, Skills Used / Learned
	From	To	
Address (include city & state)			
Phone	Rate of Pay		
	Start	End	
Job Title			
Supervisor			
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Address (include city & state)			
Phone	Rate of Pay		
	Start	End	
Job Title			
Supervisor			
Reason for Leaving			May we contact this employer?

EDUCATION

SCHOOL	NAME & LOCATION	GRADUATE	COURSES TAKEN	DEGREE EARNED
HIGH SCHOOL		<input type="checkbox"/> YES <input type="checkbox"/> NO		
VOCATIONAL SCHOOL		<input type="checkbox"/> YES <input type="checkbox"/> NO		
COLLEGE		<input type="checkbox"/> YES <input type="checkbox"/> NO		

Other training you have received (special courses, on-the-job training, seminars, etc.) _____

Other skills, experience or interests you have that may be useful in evaluating you for employment: _____

REFERENCES

Do not list relatives or former employees.

NAME	ADDRESS	TELEPHONE	HOW LONG KNOWN / RELATIONSHIP

State any additional information you feel may be helpful to us in considering your application. _____

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is grounds for refusal to hire or, if hired, dismissal.

I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have personal or otherwise, with regard to any of the subjects covered by this application and release all such information to you. I authorize you to request and receive such information.

In consideration for my employment and being considered for employment by your company, I agree to conform to the rules and regulations of the company and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by your company at any time, at the company's sole option and without any prior notice to me. I further acknowledge that this application does not constitute or create a written employment contract, and that if employed, I will be employed as an employee at-will and my employment may be terminated at any time, and any offer of employment, if such is made, may be withdrawn, with or without cause, and with or without prior notice, at any time, at the option of the company.

APPLICATANT'S SIGNATURE _____

DATE _____