



ONE SOURCE PRODUCTS

130 N New York Ave • Wichita, KS 67214
(316) 858-8700

EMPLOYMENT APPLICATION

READ BEFORE CONTINUING, FAILURE TO COMPLY WITH INSTRUCTIONS WILL RESULT IN YOUR APPLICATION NOT BEING CONSIDERED. When completing this application, answer all questions fully and truthfully. Use only the space provided for each question. Do not reveal your gender, race, creed, union affiliation, age, color, national origin or any other class of individuals protected by local, state or federal laws, as this information will not be used to evaluate your qualifications for employment.

DATE: _____

Last Name _____ First _____ MI _____

Street Address _____ City _____ State _____ Zip _____

(_____) _____ @ _____ . _____
Cell Phone _____ Email _____

1. Have you applied with us before? YES ___ NO ___ if yes, month and year _____
2. Available for full- time permanent work? YES ___ NO ___ If not, why? _____
3. Available for overtime? YES ___ NO ___ If not, what hours are you available? _____
4. Do you have reliable transportation? YES ___ NO ___
5. Can you legally drive? YES ___ NO ___
6. Are you willing to travel? YES ___ NO ___
7. For driver's license check only: Driver License # _____ State _____
8. Are you legally eligible for employment in the U.S.? YES ___ NO ___
9. Are you bilingual? YES ___ NO ___
10. Would you be willing to be subjected to drug testing? YES ___ NO ___
11. Have you been convicted of a felony or misdemeanor? YES ___ NO ___

If YES, please explain: _____

Job Position: _____ Date Available: _____ Expected Income: _____

Special Training/ Skills (machine operation & etc.): _____

Please circle and grade yourself (A, B or C) on the trades you are capable of:

	Grade	#Yrs. Experience	Employer's Name/Phone #
Door & hardware	_____	_____	_____
Toilet Accessories & Partitions	_____	_____	_____
Inventory Management	_____	_____	_____
Project Management	_____	_____	_____
Estimating	_____	_____	_____
Blueprint Reading	_____	_____	_____
Microsoft Office	_____	_____	_____

Have you ever worked for One Source Product before? YES ___ NO ___ If yes, Date: _____

Referred By (Individual, newspaper, radio, ect.) _____

Employment History:

Please list your employment for the past three (3) years, beginning with the most recent. If you need more space, please use and additional sheet of paper. Resumes will be accepted in lieu of this section. Please attach to application.

Company name: _____
Address: _____ City, State, Zip: _____
Phone: _____ Supervisor name: _____
Dates of Employment: _____
Position: _____ Responsibilities: _____

Wages at termination of employment: \$ _____ / HR /WK / MO / YR
Reason for leaving: _____

Company name: _____
Address: _____ City, State, Zip: _____
Phone: _____ Supervisor name: _____
Dates of Employment: _____
Position: _____ Responsibilities: _____

Wages at termination of employment: \$ _____ / HR /WK / MO / YR
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Company name: _____
Address: _____ City, State, Zip: _____
Phone: _____ Supervisor name: _____
Dates of Employment: _____
Position: _____ Responsibilities: _____

Wages at termination of employment: \$ _____ / HR /WK / MO / YR
Reason for leaving: _____

PLEASE READ EACH OF THE FOLLOWING:

- One Source Products is committed to maintaining a drug-free and safe workplace. Therefore, we require that all employees undergo a post-offer Physical Capacity Profile examination and drug/alcohol screening. Signing this application says that you understand and consent to these procedures if contacted for employment.
- By my signature below, I acknowledge that One Source Products, Inc. has my permission to conduct a background check and/or contact past and present employers as part of their standard screening process.
- By my signature below, I certify that the information provided in this application for employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

Signature: _____ Date: _____