

Our Policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, ancestry, physical or mental disability, or veteran status.

APPLICANT INFORMATION												
Last Name				First				Middle			D.O.B.	
Street Address								Apartment/Unit #				
City				State				ZIP				
Phone				E-mail Ad	ddress			·	1			
Date Available			Social Security No.			I		Desired Salary	_			
Are you a citizen of the United States?			YES 🗌	NO If no, are		you auth	orized t	o work in the	U.S.?	'ES 🗌		NO 🗆
Have you ever worked for this company?			YES 🗌	NO	If so, whe	If so, when?			•			
Have you ever been convicted of a Felony?			YES 🗌	NO	If yes, ex	plain						
If an offer is made, is there any time off that you would need in the next two months?												
YES NO If so, when?												
REFERENCES												
Please list three professional references.												
Full Name						Relation	ship					
Company						Phone	(	)				
Address												
Full Name						Relation	ship					
Company						Phone	(	)				
Address												
Full Name						Relation	ship					
Company						Phone	(	)				
Address												
DIGGLANATED AND CLONATURE												
I certify that my answers are true and complete to the best of my knowledge.												
I understand that 4 Corner Resources may obtain consumer credit reports and/or investigative reports about me from a reporting agency. The information contained in the report(s) may be used in whole or in part for the purpose of evaluating me for employment, promotion, reassignment or retention as an employee.												
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.												
Signature									Date			