

**Drytech Inc. Employment
Application Form**
Phone: (609) 758-1794
Please submit your application via
Email: mkinsey@drytechinc.com
Mail: P.O. Box 128, Cookstown, NJ
08511
Fax: (609) 758-1774
or
In Person: 54 Wrightstown-
Cookstown Rd, Cookstown, NJ
08511-0128

PLEASE PRINT ALL INFORMATION
REQUESTED EXCEPT SIGNATURE

OFFICE USE ONLY:

Date received: _____
Reviewed by: _____

PLEASE COMPLETE PAGES 1-6.

DATE _____

Name _____
Last First Middle Maiden

Present address _____
Street City State Zip

How long at current address? _____ Social Security No. ____ - ____ - ____

Telephone (____) _____ Email Address: _____

Are you under the age 18 ☐ YES ☐ NO, if "YES", can you provide proof of your eligibility
to work? ☐ YES ☐ NO

Are you a United States citizen? ☐ YES ☐ NO

Are you a United States green card holder? ☐ YES ☐ NO

Position applied for (1) _____
and wage desired (2) _____
(Be specific)

Days/hours available to work
No Pref ☐ Thur ☐
Mon ☐ Fri ☐
Tue ☐ Sat ☐
Wed ☐ Sun ☐

How many hours can you work weekly? _____

Employment desired: ☐ FULL-TIME ONLY ☐ PART-TIME ONLY ☐ FULL-OR PART-
TIME

When are you available to start work? _____

TYPE OF SCHOOL	NAME OF SCHOOL	NUMBERS OF YEAR COMPLETED	MAJOR & DEGREE
High School			
College			
Bus. or Trade School			
Professional School			

Have you ever been convicted of a crime which is substantially related to the functions or qualifications of the job which you are applying for? ☐No ☐Yes (a Conviction record will not necessarily disqualify you from employment).

If yes, explain the number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed and type(s) of rehabilitation.

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APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? ☐Yes ☐No

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____ ☐Operator ☐Commercial

Expiration date _____ ☐Chauffeur (CDL)

Have you had any accidents during the past three years? ☐Yes ☐No How many? ____

Have you had any moving violations during the past three years? ☐Yes ☐No How many? ____

OFFICE POSITIONS ONLY

☐Yes
Typing ☐No ____ WPM

☐Yes
10-Key ☐No

☐Yes
Word Processing ☐No ____ WPM

Personal ☐Yes ☐PC
Computer ☐No ☐Mac

Other _____
Skills _____

Please list two references other than relatives.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
Telephone (____) _____	Telephone (____) _____

Please use this space to elaborate on any background, experience, or qualifications that you believe should be considered in evaluating your qualifications for employment. You may include hobbies, volunteer experience and any other activities you believe relevant. Please omit any information that would disclose your race, gender, age, marital status, ethnic origin, religious or political affiliations, or disability.

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APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? ☐ Yes ☐ No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? ☐ Yes ☐ No

Specialty _____ Date Entered _____ Discharge Date _____

Work Experience:

Please list your work experience for the **past seven years** beginning with your most recent job held. If you were self-employed, give the firm name. **Attach additional sheets if necessary.**

Name of Employer
Address
City, State, Zip Code
Phone Number

Name of last
supervisor

Employment
dates

Pay or salary

From _____
To _____

Start _____
Final _____

Your last job title _____

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____

Name of Employer Address City, State, Zip Code Phone Number	Name of last supervisor	Employment dates	Pay or salary
		From _____ To _____	Start _____ Final _____
	Your last job title _____		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____ _____ _____ _____			

Name of Employer Address City, State, Zip Code Phone Number	Name of last supervisor	Employment dates	Pay or salary
		From _____ To _____	Start _____ Final _____
	Your last job title _____		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____ _____ _____ _____			

May we contact your present employer? ☐Yes ☐No

Did you complete this application yourself ☐Yes ☐No If not, who did? _____

After reviewing the attached job description, please indicate if you are able to perform the essential functions of the job you have applied ☐Yes ☐No. If you answered “No”, please identify those job functions that you cannot perform. If a reasonable accommodation is required to enable you to perform the job properly and safely, please describe: _____

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Drytech Inc., (hereinafter called “the Company”), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship either in the position applied for or any other position, and regardless of the contexts of the employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee Drytech Inc. or otherwise to change in any respect the employment-at-will relationship by the Owner/Managing Member of the Company. Both the undersigned and Drytech Inc. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, all previous employers (unless otherwise indicated), references and other and hereby release the Company from any liability as a result of such contact.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. Upon written request from me, the Company will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days and further that at any time during the probationary period or thereafter, my employment relationship with the Company may be terminable at will for any reason by either party.

Signature of applicant _____ Date _____

Drytech Inc. is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age, or disability. We assure you that your opportunity for employment with Drytech Inc. depends solely on your qualifications.

Thank you for your completion of this application form and for your interest in our business.