



Lone Star Enterprises, Inc.

46731 SD Hwy 44

Lennox, SD 57039

605-647-2587 / 866-393-1116

An Equal Opportunity Employer

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ City, State: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Please answer

Read a tape measure and calculate fractions	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Operate a Horizontal Band saw	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Read Micrometer / Caliper	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Operate a Plasma Cutter	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Lift 50lbs 75lbs 100lbs (circle weight)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Operate Manual milling machine	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you weld?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Operate a Manual Lathe	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you have a legal current Drivers License	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Operate a drill press	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you drive a tractor	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Operate hand grinders, drills, etc.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you Drive a forklift	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Drive a truck and back up a trailer	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Obtain a medical DOT card	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Any allergies such as grain dust, animals, etc. (you will be subjected to these allergens)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you work evenings and Saturdays?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you have reliable transportation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Please Explain traffic or other legal violations in last three (3) years, other than felony

Have you signed a non-compete agreement that would prohibit you from working with us?

YES

NO

If yes, please explain:

Please use this space to explain or share more information on the questions above.

Skills, Hobbies and Volunteer work, etc.

Please reference any skills, hobbies, or volunteer work you have done:

Disclaimer and Signature

Lone Star Enterprises, Inc. is an Equal Opportunity Employer

I certify I understand that this company performs background checks and that my answers are true and complete to the best of my knowledge.

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: _____