



Application for Employment

Hyspan Precision Products, Inc.
1685 Brandywine Avenue
Chula Vista, California 91911
Phone: 619-421-1355
Fax: 619-421-1702

Name:	Last	First	Middle Initial	Social Security Number
Address:	Street	City	Zip	Phone Number
Job Applied for	Expected Wage \$	Full Time <input type="checkbox"/>	Email	
Date you can start				

Work History (List present or most recent employment first)

Company Name	Employed	(from)	(to)
Address			
Reason for leaving	May we contact your previous employer?		
Supervisor's Name and Title	Phone Number		
Description of Duties			

Company Name	Employed	(from)	(to)
Address			
Reason for leaving	May we contact your previous employer?		
Supervisor's Name and Title	Phone Number		
Description of Duties			

Education

High School – Name and Location	Last Grade Completed
College and/or Special Training	
How long have you been a resident at the address listed on the application?	
Previous Residence	How long?

Hyspan is an Equal Opportunity Employer, and selects new employees and promotes current employees without regard to National Origin, Age, Race, Sex, Color, Religion, Marital Status or Handicap.



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PRE-EMPLOYMENT PHYSICAL WITH CHEMICAL DEPENDENCY TESTING REQUIRED

Please answer the following questions:

- Yes No Have you previously applied for employment with this company?
 Yes No Have you ever been employed by this company?
 Yes No Have you ever been discharged from a job due to misconduct?
 Yes No Have you ever been discharged from a job due to poor attendance?

Are there any special abilities which you feel add to your qualifications for this job?

What foreign languages do you read, speak and/or write?

Emergency Notification

Person to be notified in case of accident or emergency:

Name Phone Number

Address:

Street

City

Zip

The facts set forth in my application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. I hereby give permission to this company or its duly authorized representatives to contact any persons or companies named in this application, other than this employer.

Date

Signature of Applicant

To be completed by Hiring Manager

Interviewed: Yes No Date

Supervisor Employed Job Title

Start Date Starting Rate \$ Full Time Part Time

Received Employee Package

Immigration Reform and Control Act of 1986 forms completed:

How did applicant learn about this job?

Remarks: