APPLICATION FOR EMPLOYMENT
Equal Opportunity Employer

DATE _____ **LOCATION** _____

PERSONAL INFORMATION

NAME (Last, First, Middle)		ALIAS (IF APPLICABLE)	
PRESENT ADDRESS	CITY	STATE	ZIP CODE
PERMANENT ADDRESS	CITY	STATE	ZIP CODE
PHONE NO.		EMAIL ADDRESS	
ARE YOU 18 YEARS OF AGE OR OLDER? ☐ YES ☐ NO			

EMPLOYMENT DESIRED

POSITION APPLYING FOR		DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED? ☐ YES ☐ NO	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? ☐ YES ☐ NO		
HAVE YOU EVER APPLIED TO TMS INTERNATIONAL BEFORE? ☐ YES ☐ NO		WHERE	WHEN
HAVE YOU EVER WORKED FOR TMS INTERNATIONAL BEFORE? ☐ YES ☐ NO		WHERE	WHEN
DO YOU HAVE ANY RELATIVES WHO ARE EMPLOYED BY TMS INTERNATIONAL? ☐ YES ☐ NO IF YES, PLEASE PROVIDE DETAILS?			
HOW WERE YOU REFERRED TO OUR ORGANIZATION?			

EMPLOYMENT HISTORY

DATE MONTH AND YEAR	NAME & ADDRESS OF EMPLOYER	POSITION	REASON FOR LEAVING
FROM			
TO			
FROM			
TO			
FROM			
TO			
FROM			
TO			

1155 Business Center Drive
Horsham, PA 19044
215-956-5500

2835 East Carson Street
Pittsburgh, PA 15203
412-678-6141

Rev. 6/2022

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EDUCATION HISTORY

NAME & LOCATION OF SCHOOL		# OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL			☐ YES ☐ NO	
HIGH SCHOOL OR EQUIVALENT			☐ YES ☐ NO	
COLLEGE			☐ YES ☐ NO	
TECHNICAL OR OTHER			☐ YES ☐ NO	

US MILITARY HISTORY

BRANCH OF SERVICE	RANK AND TYPE OF SERVICE
# OF YEARS OF MILITARY SERVICE	TRAINING/EXPERIENCE RECEIVED

EQUIPMENT QUALIFIED TO OPERATE

EQUIPMENT TYPE	WHERE	YEARS EXPERIENCE

PROFESSIONAL REFERENCES (*EXCLUDING RELATIVES*)

NAME	ADDRESS	BUSINESS	YEARS KNOWN

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES AND CAN YOU PROVIDE VALID DOCUMENTATION? ☐ YES ☐ NO	ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES TODAY AND IN THE FUTURE WITHOUT EMPLOYER SPONSORSHIP? ☐ YES ☐ NO

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Please provide any additional information relating to your ability to perform the job for which you have applied such as licenses, professional memberships, hobbies, etc. Do not include information which would denote race, color, sex, age, national origin, disability, ancestry, religious or political affiliation.

APPLICANT'S STATEMENT

I understand TMS International, LLC (TMS) follows an "employment at will" policy, in that I or TMS may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the President and CEO.

I understand this application is not a contract or employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand this application will be active for a period of one year; after that time, if I wish to be considered for employment, I must submit a new application.

I understand TMS will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools and firms name therein, except my current employer if so noted, to provide any information requested about me (current employer may be contacted after an offer of employment has been accepted by me), and I release them all liability for damage in providing this information. I also understand I may be required to submit to and pass a substance abuse test as a condition of employment.

I certify all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

APPLICANT'S SIGNATURE _____

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