



Desco Inc.
2014 Northside Dr.
Statesville, NC 28625
704-872-7661

Employment Application

Applicant Information

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

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ 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: _____ Address: _____

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: _____



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References

Please list three professional references.

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____





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Previous Employment

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO



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Disclaimer and Signature

I certify 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: _____

At Will Employment

The relationship between you and Desco, Inc. is referred to as “employment at will.” This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the Desco, Inc.. No representative of Desco, Inc. has authority to enter into any agreement contrary to the foregoing “employment at will” relationship. You understand that your employment is “at will”, and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Executive Vice President, Chief Operations Officer, or the Company’s President.

MVR Release Consent Form

By signing below, I, _____, (print name) voluntarily give consent to Desco, Inc. to obtain a copy of my Motor Vehicle Record (MVR). This consent is given in satisfaction of Public Law 18 USC 2721 et. Seq., “Federal Drivers Privacy Protection Act”, and is intended to constitute “written consent” as required by this Act.

Signed: _____

Date: _____

Driver’s License Number: _____

State: _____