

**EMPLOYMENT
APPLICATION**



**AN EQUAL OPPORTUNITY
EMPLOYER**

It is the policy of the Company to promote equal employment opportunity without regard to an individual's age, race, color, sex, religion, national original, physical or mental disability, or military status. In this light, all personnel actions will be based solely on an individual's ability to perform the work in question

1800 Zinc Plant Rd
CLARKSVILLE, TN 37040

Fill out **all** information and email to Kathy.spiceland@nyrstar.com **OR**
drop off with Security at our Clarksville location.

PERSONAL INFORMATION

DATE _____

Name _____
 LAST FIRST MIDDLE

ADDRESS _____
 STREET CITY STATE ZIP

PHONE NO. _____ ARE YOU 18 YEARS OR OLDER?

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES?

HAVE YOU EVER BEEN CONVICTED OF A FELONY YES () NO () IF YES, PLEASE EXPLAIN:
(A conviction will not necessarily result in the denial of employment)

EMPLOYMENT DESIRED

POSITION _____ DATE AVAILABLE _____

ARE YOU EMPLOYED NOW? IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?

EVER APPLIED TO THIS COMPANY BEFORE? WHEN? _____

REFERRED BY _____

EDUCATION	NAME AND LOCATION OF SCHOOL	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL			

GENERAL

SPECIAL SKILLS, CERTIFICATIONS OR COURSES THAT MAY ASSIST YOU AS A NYRSTAR EMPLOYEE

*The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

EMPLOYMENT HISTORY (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH MOST RECENT)

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

WHICH OF THESE JOBS DID YOU LIKE BEST? _____

WHAT DID YOU LIKE MOST ABOUT THIS JOB? _____

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS/PHONE NO.	BUSINESS	YEARS ACQUANTED

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE.

DATE: _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

“Job applications will be considered active for a period of 30 days.
If you wish to be considered for employment after thirty days,
it will be necessary for you to come in to renew this application personally.”