## **Lafayette Monument Company**

2798 Highway 52 East Lafayette, TN 37083 careers@lafayettemonument.com

Phone: (615) 688-5360 Fax: (615) 688-5370

PLEASE NOTE: It is important that you complete all parts of the application. If your application is incomplete or does not clearly show the experience and/or training required, your application may not be accepted. If you have no information to enter in a section, please write N/A.

Name and Address							
Name (First, MI, Last)				Social Security Number			
Mailing Add	lress						
City, State, a	nd Zip Code						
Telephone				Alternate Phone			
If under 18, please list age				Email			
			Iob	Туре			
				ailable to wor	k		
☐ I have no preference.	☐ Mon.	☐ Tues.	□ Wed.	☐ Thurs.	□ Fri.	□ Sat.	□ Sun.
I am seeking	. a.	☐ Full-time j	ob	☐ Part-time j	<u> </u> ob	☐ Full- or Part-time	
How many hours can you work weekly?				Can you work nights?		Date available to begin	
			Additional	Information			
Have you ever been employed by this organization in the past?					□ Yes	□ No	
I certify that I am a U.S. citizen, permanent resident, or a foreign national with authorization to work in the United States.					□ Yes	□ No	
Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld judgment to a felony?				□ Yes	□ No		
If Yes, please	e explain:						
Do you have a driver's license? ☐ Yes ☐ No ☐ Driver's license number				nse number	Issued in what state?		
Have you had any accidents during the past three years?				How many?			
Have you had any moving violations during the past three years?				How many?			

	Educ	ation			
School	Location (mailing ac	ldress)	Years Completed	Major	Degree or Diploma
High School					
					1
College or Business/Trade	e School				
					İ
	Mil	itary			
Have you even been in the Armed Forces?		□ Yes	□No	Date entered	
Are you now a member of the National Guard?		□ Yes	□ No	Discharge date	
Specialty					

Work Experience					
Please list ALL work experience beginning with your most recent job held. Attach additional sheets if necessary.					
Company	Name of last supervisor	Hrs/week			
Address	Start Date	Starting Salary			
City State and Tin Code	End Date	Final Calass			
City, State, and Zip Code	End Date	Final Salary			
Phone number	Your last job title				
Reason for leaving (be specific)					
List the ishe you held duties wentermed chille used on	10				
List the jobs you held, duties performed, skills used or	learned, advancements or pro-	omotions while you worked			
at this company.					
May we contact this employer? $\square$ Yes $\square$ No					
Company	Name of last supervisor	Hrs/week			
Address	Start Date	Starting Salary			
City, State, and Zip Code	End Date	Final Salary			
City, State, and Zip Code	End Date	Tillai Salary			
Phone number	Your last job title				
Reason for leaving (be specific)					
	1 1 1	1.1			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked					
at this company.					
May we contact this employer? $\square$ Yes $\square$ No					

Work Experience (continued)					
Company	Name of last supervisor		Hrs/week		
Address	Start Date	Starting Salary			
City, State, and Zip Code	End Date	Final Salary			
Phone number	Your last job title				
Reason for leaving (be specific)					
List the jobs you held, duties performed, skills used or lat this company.	learned, advancements or pro	omotions while	you worked		
May we contact this employer? $\square$ Yes $\square$ No					
References					
Please include name, phone number, and circumstances of your acquaintance. Exclude relatives and former employers.					
1.					
2.					
3.					
4.					
I certify that all answers and statements on this applic knowledge. I understand that, should this application application may be rejected or my employment with th	contain any false or mislead	,	U		
Signature		Date			

Email completed application to careers@lafayettemonument.com or Drop off at our office in Lafayette