



# Application for Employment

1065 Executive Parkway, St. Louis, MO, 63141-6367 • (314) 227.2700 • Fax (314) 227.2720

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

First Name (Please Print)	Last Name	Middle	Date
Address		City	State Zip
Telephone Number ( )	Day Time Telephone Number ( )	SSN #	
Position Applying For:			

If you are under 18 years of age, can you provide required proof of your eligibility to work?  Yes  No  N/A

Have you ever filed an application with us before?  Yes  No  
If yes, give date \_\_\_\_\_

Have you ever been employed with us before?  Yes  No  
If yes, give date \_\_\_\_\_

Are you currently employed?  Yes  No    May we contact your present employer?  Yes  No  N/A  
May we contact your previous employers?  Yes  No  N/A

Are you prevented from lawfully becoming employed in the country because of Visa or Immigration Status?  Yes  No  
*Proof of Citizenship or Immigration Status will be required upon employment.*

On what date would you be available for work? \_\_\_\_\_

Are you available to work:     Full Time     Part Time     Shift Work     Temporary

Have you been convicted of a felony within the last 7 years?  Yes  No  
*Conviction will not necessarily disqualify an applicant from employment.*

If yes, please explain \_\_\_\_\_

Have you ever had any job-related training in the United States military?

If Yes, please describe \_\_\_\_\_

Are you physically or other wise unable to perform the duties of the job for which you are applying  Yes  No

Education	High School	Undergraduate College/University	Graduate School	Trade School
School Name & Location				
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe any specialized training, apprenticeship, skills and extra-curricular activities				
Describe any honors you have received				

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

Fax completed form to 314.227.2720 or e-mail to [human.resources@biotechxray.com](mailto:human.resources@biotechxray.com)

# Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Date Month And Year	Name, Address, and Phone of Employer	Salary	Position	Reason For Leaving
From				
To				
From				
To				
From				
To				
From				
To				

List professional, trade, business or civic activities and offices held. You may exclude membership which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:


## REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.
1
2
3

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statement contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby acknowledge that any employment relationship with BioTech X-ray, Inc. is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of BioTech X-ray, Inc.

In the event of employment, I understand that false or misleading information given in my application or interview (s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Interviewer:	Date:
Remarks:				
Employed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date of Employment:	
Job Title:		Hourly Rate/Salary:		
Notes:				

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