



# APPLICATION FOR EMPLOYMENT

## Personal Information

Full Name: (Last, First, Middle)		Date:
Address:		
City:	State:	Zip:
Phone:	email:	Are you 18 years of age or older? Yes      No
Have you been convicted of a felony in the past ten years?    Yes      No	If Yes, describe in full.	

## Employment Desired

Position(s) you are applying for:			
Are you being referenced by any MRI employee?	Yes	No	Whom
Were you previously employed by MRI?	Yes	No	When
Work availability:	Full Time	Part Time	Shift Work      Temporary
Can you travel if the job requires it?	Yes	No	
Can you, with or without reasonable accommodations, perform the essential functions of this job? (if you have any questions about the functions of this position, please ask the interviewer before answering this question.)			Yes      No
Are you legally eligible for employment in this country? (a completed federal I-9 form will be required upon hire, and submitted to e-Verify)	Yes	No	

Describe your current qualifications for this position, including skills, abilities, work habits, and work experience.



## Record of Education

	Name and Address of School	Course of Study	Graduate	Diploma/Degree
High School or Equivalent			Yes    No	
College			Yes    No	
Other (specify)			Yes    No	

Why do you believe you should be hired?

If employed, how long would you expect to work? \_\_\_\_\_

If less than one year, state reason. \_\_\_\_\_

What is your date of availability? \_\_\_\_\_ Are you interested in career work?    Yes    No

Minimum acceptable salary: \$ \_\_\_\_\_ Expected salary: \$ \_\_\_\_\_

If now employed, why do you desire to make a change?



## Employment Experience

Start with your current job. Include all periods of employment and unemployment.

1	Employer:	Dates Employed		Work Performed
	Address:	Fr:	To:	
	Job Title:	Hourly/Salary*		
	Supervisor:	Starting	Ending	
	Reason for leaving:	\$	\$	

2	Employer:	Dates Employed		Work Performed
	Address:	Fr:	To:	
	Job Title:	Hourly/Salary*		
	Supervisor:	Starting	Ending	
	Reason for leaving:	\$	\$	

3	Employer:	Dates Employed		Work Performed
	Address:	Fr:	To:	
	Job Title:	Hourly/Salary*		
	Supervisor:	Starting	Ending	
	Reason for leaving:	\$	\$	

4	Employer:	Dates Employed		Work Performed
	Address:	Fr:	To:	
	Job Title:	Hourly/Salary*		
	Supervisor:	Starting	Ending	
	Reason for leaving:	\$	\$	

\* It is optional to provide this information

## References

	Name and Occupation	Address	Phone
1			
2			
3			



## Mineral Resources International, Inc<sup>®</sup>

2720 Wadman Dr. Ogden, Utah 84401 • 800-731-7866 • 801-731-7040 • Fax: 801-731-7975

1. I understand that Mineral Resources International, Inc., hereafter referred to as "MRI," may require drug testing and/or a medical examination during employment, and I agree to submit voluntarily to such testing and examinations when requested to do so. I understand that individuals with a positive drug or alcohol test may not be considered for hire.
2. I have been advised that lie detector tests, as a condition of hiring or continued employment, are prohibited by law.
3. It is agreed and understood that this application for employment in no way obligates MRI to employ me.
4. Utah is an at-will state, and as such my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either MRI or myself.
5. I agree, if hired, to furnish such additional information and complete such examinations as may be required to complete my employment file.
6. I authorize release of background information for investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for not employing me or cause for my dismissal if I am employed.
7. I release from all liability and hold harmless MRI personnel and all persons, companies, or corporations supplying requested information on my past employment and background.
8. I understand that MRI has a code of ethics for its employees and I will become fully aware of the code and abide by it and other company policies and procedures.
9. I acknowledge that at the time of termination I will return all MRI property to my Department Manager immediately.
10. I certify that the answers to the questions on this application are true and complete and that I have not knowingly withheld any information that would affect this application unfavorably.
11. I understand and agree that a condition of employment would be to sign a non-disclosure, non-competing, non-solicitation document with MRI.
12. Hiring records including but not limited to job applications, resumes and records relating to refusal to hire are retained for two years unless hired, after which they are destroyed via shredding according to MRI's Human Resources Records Retention and Destruction Procedure. Applicants are allowed to review this policy under request.
13. I understand and agree that upon termination of employment with MRI, my last paycheck may be withheld until I complete an exit interview.

\*This company has a policy of employment based on merit without discrimination towards age, race, religion, national origin, sex, disabled, or veterans.

\*This application is good for 180 days.