



**LITE THE NITE**  
TECHNOLOGIES LLC

Lite the Nite Technologies  
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## Employment Application

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. We are a drug, alcohol, and tobacco free workplace. All applicants must successfully pass a drug test.

Full Name: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_  
City State Zip

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Desired Salary \$ \_\_\_\_\_ per \_\_\_\_ Hour \_\_\_\_ Week \_\_\_\_ Month \_\_\_\_ Year

Are you a citizen of the United States?:  Yes  No

If no, are you authorized to work in the United States?:  Yes  No

Do you possess a valid driver's license?  Yes  No

Are you available to work:  Full time;  Part time;  Temporary;  Shift work

Are you employed now?:  Yes  No If so, may we contact your present employer?:  Yes  No

What date would you be available for work?: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Are you on a layoff and subject to recall?:  Yes  No

Can you travel if the job requires it?:  Yes  No

Have you ever been convicted of a felony, misdemeanor, or any violation including DUI, DWI,

traffic violation, etc?:  Yes  No If yes, please list below:

Offense	Date	County/State	Disposition
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(A conviction includes any fines paid, jail sentences, or probation served. Failure to disclose or falsification of any conviction(s) including those which have been merged, shall result in automatic rejection of the application. Conviction of a crime is not an automatic rejection. The specific situation will be reviewed.)

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_ Did you graduate? \_\_\_Yes \_\_\_No

Circle years completed: 9 10 11 12 Diploma/Degree: \_\_\_\_\_

Course of study \_\_\_\_\_

College/University: \_\_\_\_\_ Address: \_\_\_\_\_

From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_ Did you graduate? \_\_\_Yes \_\_\_No

Circle years completed: 1 2 3 4 Diploma/Degree: \_\_\_\_\_

Course of study \_\_\_\_\_

Graduate/Professional: \_\_\_\_\_ Address: \_\_\_\_\_

From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_ Did you graduate? \_\_\_Yes \_\_\_No

Circle years completed: 1 2 3 4 Diploma/Degree: \_\_\_\_\_

Course of study \_\_\_\_\_

Describe specialized training, apprenticeship, skills, and extra-curricular activities:

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Honors Received: State any additional information you feel may be helpful to us in considering you for this position:

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

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List all languages you read, write, and speak:

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## Military Service

Branch: \_\_\_\_\_ From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

## Previous Employment

List present employer or most recent employment first. Continue on back of page if necessary.

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ May we contact this employer for a reference?  Yes  No

Starting Salary \$ \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ Per \_\_\_\_\_ Hour \_\_\_\_\_ Week \_\_\_\_\_ Month \_\_\_\_\_ Year

Responsibilities: \_\_\_\_\_

Employed From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ Reason For Leaving: \_\_\_\_\_

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Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ May we contact this employer for a reference?  Yes  No

Starting Salary \$ \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ Per \_\_\_\_\_ Hour \_\_\_\_\_ Week \_\_\_\_\_ Month \_\_\_\_\_ Year

Responsibilities: \_\_\_\_\_

Employed From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ Reason For Leaving: \_\_\_\_\_

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Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ May we contact this employer for a reference?  Yes  No

Starting Salary \$ \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ Per \_\_\_\_\_ Hour \_\_\_\_\_ Week \_\_\_\_\_ Month \_\_\_\_\_ Year

Responsibilities: \_\_\_\_\_

Employed From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ Reason For Leaving: \_\_\_\_\_

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Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ May we contact this employer for a reference?  Yes  No

Starting Salary \$ \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ Per \_\_\_\_\_ Hour \_\_\_\_\_ Week \_\_\_\_\_ Month \_\_\_\_\_ Year

Responsibilities: \_\_\_\_\_

Employed From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ Reason For Leaving: \_\_\_\_\_

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## References

Please list three references other than your previous employers.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

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Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

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Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

## Disclaimer and Signature

*I understand that as a part of normal procedure for processing employment applications and employment requests, a routine inquiry may be made concerning information of character, general reputation, credit, personal characteristics, mode of living and driving records or any reports connected with such records. I authorize such investigations and acknowledge that information on the nature and scope of such reports, if any are made, is available upon written request.*

*I certify that my answers are true and complete to the best of my knowledge.*

*The applicant understands that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document is executed by the employer and employee in writing.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my discharge, I also understand that I am required to abide by all rules and regulations of the employer.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Personnel Department Use Only**

Arrange Interview: \_\_\_ Yes \_\_\_ No

Remarks:

\_\_\_\_\_

\_\_\_\_\_

Employed: \_\_\_ Yes \_\_\_ No                      Date of Employment \_\_\_/\_\_\_/\_\_\_\_\_

Job Title: \_\_\_\_\_

Initial Rate Of Pay \$\_\_\_\_\_ per \_\_\_\_\_      Permanent Rate Of Pay \$\_\_\_\_\_ per \_\_\_\_\_

By \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_\_\_