TD3 ENTERPRISES, LLC.

With this application, please attach the following pieces of documentation:
Two forms of Identification *(Social Security Card, State ID, Birth Certificate, etc.)*

If Mailing: 1330 N. Classen, Suite 204
Oklahoma City, OK 73106
OFFICE (405) 228-4963
FAX (866) 601-5495

JOB APPLICATION

(Please Print in Blue or Black Ink Only)

First Name	Last Name	SS#
Permanent Address		
City	State	Zip
Cell Phone No. with Area Code	Home Phone No. with Area Code	Position Applying For
Email* *Example jdoe@td3.com*	Birth Date mm/dd/yyy / /	

**If you provide an email address, we may use it to contact you about your account.*

Years at Current Address: _____

U.S. Citizen or Permanent Resident: _____ Yes _____ No Sex: ☐ Male ☐ Female Race (optional): _____

Residential Street Address if Different from Permanent (No P.O. Boxes)		
City	State	Zip

Employment History

Present or Previous Employer	Position Title	Start Date/End Date	Supervisor Name & Contact Phone	Reason for Leaving
1.		/		
2.		/		
3.		/		
4.		/		

May We Contact Your Current Employer? _____ Yes _____ No

For Office Use Only- DO NOT WRITE IN THIS SPACE.

Education

Name of School or College/University	Degree/Diploma	Graduation Date
1.		
2.		
3.		

References

Name of Reference	Relationship	Phone Number
1.		
2.		
3.		

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

_____ _____
Applicant Signature Date

_____ _____
TD3 Representative Signature Date

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