

## EMPLOYMENT APPLICATION

PLEASE PRINT					
APPLICANT INFORMATION					
Last Name	First		M. I.	Date	
Street Address			Apartment/Unit		
City	ity State		ZIP	ZIP	
<u>ו</u> ות			I		
Phone #	Cellular/O	ther Phone #	Email		
Date Available			Desired Salary \$	Per	
			Desireu Salary ş	Fei	
Position Applied for:		□ Production □ Ware	ehouse 🗆 Quality 🗆	] Maintenance	
		□ Tool Room □ Autom	ation 🗆 Administra	tive 🗆 Management	
		□ other			
Type of employment desired:		Type of work schedule desired:			
🗆 Full-Time 🛛 Part-Time 🖓 Seasonal		□ Days □ Nights □ Flexible (Days& Nights) □ other			
Can you travel outside of the United States for work		Do you have legal authorization to work in the U.S.? □ Yes □ No			
purposes? 🗆 Yes 🗆 No		Will you require a sponsorship to work?  Ves  No			
Referred by:		Have you ever worked for this company?  Yes  No If so, when?			

PREVIOUS EMPLOYMENT (Most recent First)	
Company	Phone ( )
Address	Supervisor's name
	May we contact your supervisor for a reference? $\Box$ Yes $\Box$ No
From To	Responsibilities
Job Title	
Reason for Leaving	
Company	Phone ( )
Address	Supervisor's name
	May we contact your supervisor for a reference? $\Box$ Yes $\Box$ No
From To	Responsibilities
Job Title	
Reason for Leaving	
Company	
Company	Phone ( )
Address	Supervisor's name
	May we contact your supervisor for a reference? $\Box$ Yes $\Box$ No
From To	Responsibilities
Job Title	
Reason for Leaving	



#### EMPLOYMENT APPLICATION

EDUCATION		
High School Name	From To	
Address	Did you graduate? □Ye	s 🗆 No Year Graduated
College Name	From To	Did you graduate? 🗆 Yes 🛛 No
Address	Year Graduated	Type of Degree

MILITARY SERVICE					
Have you service in the Military?	□ Yes	□ No	Branch	From	То

<b>REFERENCES</b> Please list two professional references			
Full Name	Relationship	Know for <b>#</b> of yrs.	
Company	Phone ( )		
Full Name	Relationship	Know for <b>#</b> of yrs.	
Company	Phone ( )		

### APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references and conduct a background check (criminal, personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering, and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment or any basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at anytime, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired; I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard. Furthermore, I also understand that I will be required to take and pass a pre-employment drug screen.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demeans, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). The Company takes all complaints or harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employment, or may result in immediate discharge from the employer's service, whenever it is discovered.

## DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of foregoing Applicant Statement.

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



# DO NOT WRITE BELOW THIS LINE

Interview date/ Time:		with	
Interview date/ Time:		with	
Interview date/ Time:		with	
Interview Decision:		Notified Applicant of Decision	
POSITION	_ DEPT	SHIFT	SALARY/WAGE
Comments:			_
DATE REPORTING TO WORK	DATE REPORTING TO WORK REPORTING TO		