## Application for Employment

FERSONAL INF	ORMATION			Date	
Name – Last		First		MI	
Address - Street	city	State	<u> </u>	Zip	
Phone/Cell Num	ıber	Soc Secur	rity Number		
Referred by			<u></u>		
Employment	Desired		<u> </u>		
Position	Date yo	du can start	Salary Desíred		
Are you employe	id now? If so, may we inq	uire of your present en	nployer? If no, give	e reason.	
Ever applied to t	his company before?	When?			
EDUCATION	Name & location of school	∦ years Completed	Did you Graduate?	Subjects studied & degree received	
Elementary School					
High School					
					-
College			1		

Subjects of special study

Activities other than religious (civic, athletic, etc.)

## SCHMITZ PALLET SERVICE

## FORMER EMPLOYERS

Date: Month/Year	Name & Address of Employer	Salary	Position	Reason for leaving
	· · · · · · · · · · · · · · · ·			

REFERENCES: Give below the names of 3 persons not related to you, whom you have known at least 1 year

Name	Address	Business	Years Acquainted

PHYSICAL RECORD: Do you have any physical condition which may limit your ability to perform the job applied for? This question is voluntary, and any answers will be kept confidential.

DRIVER'S LICENSE	
Driver's License #	Class
Do you have a current DOT Health Card?	Exp date:
Do you have a current Forklift Certification Card?	Exp date:
Would you submit to pre-employment drug/alcohol	testing?
In case of emergency, notify:	
Name Phone #	

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Signature

Date