
Tink, Inc Employment Application

An Equal Opportunity Employer

Please Print

Date

Last Name

First Name

Middle Initial

Self-Assessment Questionnaire

Below is a list of work related tasks. We would ask that you carefully consider your experience and skill levels with relation to these tasks and provide an honest self-assessment.

NP – would be ‘Not Proficient’ – indicating that you have not performed this task in your working history.

1 – would indicate that you have undertaken these tasks before but are not confident performing them unaided or unsupervised. 2, 3, 4 are the increasing skill levels to which you feel that you can perform this task; and

5 – would indicate that you consider you could perform this task to an exceptional level

Please be as honest as possible as this will assist us to ensure a ‘best fit’

1. Hand/Power Tools: Grinder, Drill, Pneumatic Grinders, Etc...

NP 1 2 3 4 5 Yrs Exp- _____

2. Industrial Power Tools: Brake, Shear, Band Saw, Drill Press

NP 1 2 3 4 5 Yrs Exp- _____

3. Forklift Experience

NP 1 2 3 4 5 Yrs Exp- _____

4. Oxy/Acetylene **cutting** of steel plate

NP 1 2 3 4 5 Yrs Exp- _____

5. Reading and understanding drawings, measuring, marking, prepping and tacking complex fabrications to a **high level of precision**

NP 1 2 3 4 5 Yrs Exp- _____

6. Welding mild steel using (**GMAW**) Mig Welding process(s), spray transfer, and short arc

NP 1 2 3 4 5 Yrs Exp- _____

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Revised 1-1-18

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Date Last Name First Name Middle Initial

Present Address

No. & Street City State Zip

(____) _____ - _____ (____) _____ - _____
Home Phone Cell Phone County

Employment Desired

Position applying for: _____

Are you applying for:

Regular full-time work? Yes No

Regular part-time work? Yes No

Temporary work, e.g., summer or holiday work? Yes No

What days and hours are you available for work? _____

If applying for temporary work, during what period of time will you be available?

From: _____ To: _____

Are you available for work on weekends? Yes No

Would you be available to work overtime, if necessary? Yes No

If hired, on what date can you start work? _____

Have you ever been disciplined at work (this includes verbal warning, formal letters of counseling, written warning, reprimands, suspensions, reductions in pay, reassignment or demotions)?

Explain:

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Personal Information

Have you ever applied to or worked for Tink, Inc. before? Yes No

If yes, when? _____

Do you have any friends or relatives working for Tink, Inc? Yes No

If yes, state name(s) and relationship:

Name

Relationship

Name

Relationship

Why are you applying for work at Tink, Inc.?

If hired, would you have a reliable means of transportation to and from work? Yes No

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.) Yes No

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? Yes No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No

If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measure that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

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Education, Training, and Experience

School	Name and Address	No. of years Completed	Did you Graduate?	Degree or Diploma
High School	Name _____ Address _____ City _____ State _____ Zip _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
College/ University	Name _____ Address _____ City _____ State _____ Zip _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Vocational/ Business	Name _____ Address _____ City _____ State _____ Zip _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Do you have any other experience, training, qualifications, or skills which you feel make you especially suited for work at Tink, Inc.? Yes No

If so, please explain:

Answer the following questions if you are applying for a professional position:

Are you licensed/certified for the job applied for? Yes No

Name of license/certification: _____

Issuing state: _____

License/certification number: _____

Has your license/certification ever been revoked or suspended? Yes No

If yes, state reason(s), date of revocation or suspension, and date of reinstatement.

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Employment History

Are you currently employed?

Yes No

If so, may we contact your current employer?

Yes No

List below all present and past employment starting with your most recent employer. Account for all periods of time from date of application for the past five (5) years. You must complete this section even if attaching a resume.

Name of Employer (_____)_____-_____
Telephone No.

Type of Business Your Supervisor's Name

Address & Street City State Zip

Dates of Employment: _____
From To

Your Position and Duties

Reason for leaving:

If quit, how much notice did you give?

Name of Employer (_____)_____-_____
Telephone No.

Type of Business Your Supervisor's Name

Address & Street City State Zip

Dates of Employment: _____
From To

Your Position and Duties

Reason for Leaving:

If quit, how much notice did you give?

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Employment History, continued

Name of Employer

(_____)_____-_____
Telephone No.

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip

Dates of Employment: _____
From To

Your Position and Duties

Reason for leaving?

If quit, how much notice did you give?

Name of Employer

(_____)_____-_____
Telephone No.

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip

Dates of Employment: _____
From To

Your Position and Duties

Reason for leaving:

If quit, how much notice did you give?

Name of Employer

(_____)_____-_____
Telephone No.

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip

Dates of Employment: _____
From To

Your Position and Duties

Reason for leaving:

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If quit, how much notice did you give? _____

Military Service

Have you obtained any special skills or abilities as the result of service in the military? Yes No

If so, describe:

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

First Name Last Name Telephone No. (_____)_____-_____

Address & Street City State Zip

Occupation Number of Years Acquainted _____

First Name Last Name Telephone No. (_____)_____-_____

Address & Street City State Zip

Occupation Number of Years Acquainted _____

First Name Last Name Telephone No. (_____)_____-_____

Address & Street City State Zip

Occupation Number of Years Acquainted _____

Have you ever been involuntarily terminated from a job (including lay-off, firings, forced or requested resignations, or probationary releases)? Do NOT list separation which resulted from a medical inability to work. Explain:

Tink, Inc Pre-Employment Investigation Form

Important note: The information requested on this form is for the sole purpose of undertaking a pre-employment investigation and should be completed only by a candidate who is being considered for or has been offered a position with the company.

Candidate Information (Please Print):

Last	First	MI
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Maiden Name	DOB	Race
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Physical Address (No P.O. Box)	City	State	Zip
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County	Driver's License #	State
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List the county and state of your previous places of residence, and/or employment (whichever are applicable) during the past seven years.

	County & State	Length of Time (Years & Months)
1.	_____	_____
2.	_____	_____

Authorization Release

Fair Credit Reporting Act: I hereby understand that a consumer report may be ordered for employment screening purposes, and that I am hereby giving my permission for such a report to be procured. I understand that I am entitled to see a copy of this report and a copy of "summary of Consumer Rights" before any adverse action is taken by Tink, Inc.. The information from this report will not be used in violation of any applicable state or federal equal opportunity law or regulation.

I hereby give permission to the company and its agent to verify the information submitted by me and to obtain any employment history, credit information, criminal history, or driving records. Neither the company nor its agents (including previous employers) shall be violating my right to privacy in any manner and I release them from all liability whatsoever for actions related to this investigation.

Applicant's Signature	Date
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Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my
Initials chances for employment and that the answers given by me are true and correct to the best of my
knowledge. I further certify that I, the undersigned applicant, have personally completed this
application. I understand that any omission or misstatement of material fact on this application or on
any document used to secure employment shall be grounds for rejection of this application or for
immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize Tink, Inc. to thoroughly investigate my references, work record, education and other
Initials matters related to my suitability for employment and, further, authorize the references I have listed to
disclose to the company any and all letters, reports and other information related to my work records,
without giving me prior notice of such disclosure. In addition, I hereby release the company, my
former employers and all other persons, corporations, partnerships and associations from any and all
claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be
Initials granted or during my employment, if hired, is intended to create an employment contract between me
and the company. In addition, I understand and agree that if I am employed, my employment is for no
definite or determinable period and may be terminated at any time, with or without prior notice, at the
option of either myself or the company, and that no promises or representations contrary to the
foregoing are binding on the company unless made in writing and signed by me and the Company's
designated representative.

_____ Should a search of public records (including records documenting an arrest, indictment, conviction, civil
Initials judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the
Company, I am entitled to copies of any such public records obtained by the Company unless I mark the
check box below. If I am not hired as a result of such information, I am entitled to a copy of any such
records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

_____ Date

_____ Applicant's Signature