



Application for Employment

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Name _____
Last First Middle

Address _____
Street City State ZIP

Telephone _____ Cell _____ Email _____

Position(s) applied for _____ Date of Application _____

Referred by _____

If necessary, best time to call you is _____ AM/PM Home Cell/Other

Are you 18 years of age or older? Yes No

Have you submitted an application here before? Yes No If yes, date _____

Have you ever been employed here before? Yes No If yes, dates _____

Are you legally eligible for employment in this country? Yes No

Date available to start _____

What is your desired salary range or hourly rate of pay? \$ _____ Per _____

Type of employment desired:

Full-Time Part-Time Educational Co-Op Seasonal Temporary

Are you able to perform the “essential functions” of the job for which you are applying (with or without reasonable accommodation)?

This question is not designed to elicit information about an applicant’s disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Yes No Need more information about the job “essential functions” to respond

Employment History

Starting with your most recent employer, provide the following information:

Employer #1		Telephone	Dates employed: From	to
Address			Starting Compensation	
Starting job title/final job title			<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per	
Immediate supervisor (for most recent position held)			Commission/Bonus/Other Compensation	
Why did you leave?			\$	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Final Compensation		
Email:		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per		
Summarize the type of work performed and job responsibilities.		Commission/Bonus/Other Compensation		
		\$		
What did you like most about your position?				
What were the things you liked least about the position?				

Employer #2		Telephone	Dates employed: From	to
Address			Starting Compensation	
Starting job title/final job title			<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per	
Immediate supervisor (for most recent position held)			Commission/Bonus/Other Compensation	
Why did you leave?			\$	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Final Compensation		
Email:		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per		
Summarize the type of work performed and job responsibilities.		Commission/Bonus/Other Compensation		
		\$		
What did you like most about your position?				
What were the things you liked least about the position?				

Employer #3		Telephone	Dates employed: From	to
Address			Starting Compensation	
Starting job title/final job title			<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per	
Immediate supervisor (for most recent position held)			Commission/Bonus/Other Compensation	
Why did you leave?			\$	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Final Compensation		
Email:		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per		
Summarize the type of work performed and job responsibilities.		Commission/Bonus/Other Compensation		
		\$		
What did you like most about your position?				
What were the things you liked least about the position?				

Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability.

If not addressed on previous page, have you ever been fired or asked to resign from a job?

Yes No If yes, please explain:

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

Fabrication and Machinery Knowledge (for Plant Positions)

Describe previous fabrication and machinery experience:

Administrative and Computer Skills (for Office Positions)

Describe previous administrative experience and computer skills:

Educational Background

High School Diploma or GED: Yes No Name of School: _____

Higher Education: School _____ Major or Degree: _____

References

List names and telephone numbers of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship to You	Telephone	E-mail	Years Known

List any additional information you think would be helpful in choosing you for this position.

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 (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 on any basis prohibited by applicable local, state or federal law.

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.

If I am hired, I understand that I am free to resign at any time, 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 prior 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 the federal immigration laws require me to complete an I-9 Form in this regard.

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 under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on 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 demean, 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 of harassment seriously and all complaints will be investigated promptly and thoroughly.

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 (1) eliminate me from further consideration for employment, or (2) may result in my immediate discharge from the employer's service, whenever it is discovered.

I also understand that any job offer that may result from this application is conditional upon undergoing a Pre-Employment Drug Screen and will be revoked if the result is positive for any illegal substance.

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

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

Signature of Applicant _____ Date _____