



**MILLWRIGHT SOLUTIONS, LLC**  
COMPLETE INDUSTRIAL SERVICE

211 West Fulton Street  
PO Box 645  
Wabash, IN 46992  
Phone: (260) 330-2757  
Fax: (260) 454 -2123

# Job Application

## Personal Information

Last		First	MI	SSN#	Email		
Street Address			City	ST	Zip	Home Phone	Mobile Phone
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, Date of Birth		
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please explain:				
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No			Branch	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No		War	
What position are you applying for?			How did you hear about this position?				
Expected Hourly Rate		Expected Weekly Earnings		Date Available			

## Prior Work Experience

	Current or Most Recent		Prior		Prior	
Employer						
Address						
City, ST, ZIP						
Telephone						
Name of Immediate Supervisor						
Dates of Employment	From	To	From	To	From	To
Position/Job Title						
Pay						
Reason for Leaving						
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

## Education

	Name/Location	Last Year Complete	Degree	Major or Emphasis
High School				
College/University				
Trade School				
Other				
List any applicable special skills, training or proficiencies.				

## Personal References

	Reference 1	Reference 2	Reference 3
Name			
Address			
City, ST, ZIP			
Telephone			

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.	Signature	Date
--	-----------	------