



APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

(Application will remain active for 30 days)

Position Applied For: _____ Referral Source: _____

NAME: _____ EMAIL ADDRESS: _____

ADDRESS: _____ PHONE: (____) _____
Last First M.I. Street City State Zip

Are you at least 18 years of age? Yes No

Are you a U.S. Citizen or legally authorized to work in the U.S.? Yes No

Date you are able to start work: _____

May we contact your current employer? Yes No

Are you on layoff status or subject to recall elsewhere? Yes No

Pay Expected: \$ _____ per _____

If hired, how long do you plan to continue working for the company? _____

Do you wish to work: Full-time Part-time
 Temporary

Are you willing and available to work? On call
 Days Evenings Nights
 Overtime Weekends Holidays

If applying for a job that requires one, do you have a valid driver's license? Yes No

Is there any reason you might be unable to meet our attendance requirements? Yes No

If yes, please explain _____

Have you been convicted of a felony or misdemeanor? Yes No

If so, explain _____

* A "yes" answer will not necessarily bar applicant from employment.

Have you previously applied with us? Yes No

When _____

Have you previously worked with us? Yes No

When _____

Are any of your records under a different name? Yes No

If so, what name _____

Do you have any relatives/friends working for us? Yes No

If so, who? _____

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

If no, describe the functions that cannot be performed:

EDUCATION/ TRAINING	Name and Location of School	Did You Graduate?	Subjects Studied
High School			
College			
Other Training (particularly that led to license or certification)			

Are you taking or do you plan to take any additional education? If so, what? _____

COMPUTER SKILLS / ABILITIES: List computers and programs you are familiar with and level of competency (i.e.: beginning, intermediate or advanced): _____

LANGUAGE: List any languages other than English you speak fluently: _____

PLEASE LIST WORK EXPERIENCE, INCLUDING MILITARY AND VOLUNTEER EXPERIENCE

Present or Last Employer:

Address: _____ Phone: () _____

Start Date: _____ Leaving Date: _____ Supervisor: _____ Rate of Pay \$ _____

Job Title & Duties: _____

Why Did You Leave? _____

Previous Employer:

Address: _____ Phone: () _____

Start Date: _____ Leaving Date: _____ Supervisor: _____ Rate of Pay \$ _____

Job Title & Duties: _____

Why Did You Leave? _____

Previous Employer:

Address: _____ Phone: () _____

Start Date: _____ Leaving Date: _____ Supervisor: _____ Rate of Pay \$ _____

Job Title & Duties: _____

Why Did You Leave? _____

PERSONAL REFERENCES

Name: _____ Phone: () _____

Address: _____

Occupation: _____ How Long Known: _____

Name: _____ Phone: () _____

Address: _____

Occupation: _____ How Long Known: _____

PLEASE READ EACH OF THE FOLLOWING ITEMS BEFORE SIGNING THIS APPLICATION

1. As a final step in the hiring process, an applicant may be subject to an employment entrance exam that may include screening for illegal drugs. Applicants who confirm positive on drug screening will not be considered for employment. If a job offer is made, it may be made contingent upon the successful passing of a physical.
2. **I CERTIFY** that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; false, misleading or incomplete statements on this application shall be grounds for dismissal.
3. **I AUTHORIZE** the company to investigate information concerning my previous employment, education and background. I further release all parties from all liability for any damage that may result from furnishing or receiving such information.
4. **I UNDERSTAND** and agree that my employment and compensation may be terminated at any time without prior notice, with or without cause, at the option of the company or myself, and understand that no representative of the company, other than the President, has authority to enter into any agreement contrary to the foregoing.
5. **I UNDERSTAND** that all company property must be returned and any indebtedness to the company must be paid on or before my last day of work. I authorize the company to deduct from my final paycheck an amount necessary to satisfy any unpaid obligation.
6. **I UNDERSTAND** I must have a bank account for direct deposit of my paycheck.

Date _____ Signature of Applicant _____

	ESTIMATE TIME YOU HAVE WORKED ON MACHINE SHOWN IN COLUMN TO LEFT (IN MONTHS)	TYPE OF PARTS MADE / WORKED ON MACHINE SHOWN IN COLUMN TO LEFT (IE: BOAT, AIRCRAFT, AUTOMOBILE)
CNC LATHE		
ENGINE LATHE		
CNC MILL		
BRIDGEPORT MILL		
HORIZONTAL MILL		
VERTICAL MILL		
BORING MILL		
SURFACE GRINDER		
CYLINDRICAL GRINDER		
GEAR HOB		
DRILL PRESS		
HYDRAULIC PRESS		
RADIAL DRILL		
FORK TRUCK		
SAW (METAL)		
DEBURRING PARTS		
WOODWORKING		
MECHANICAL ASSY.		
ELECTRICAL ASSY.		

OTHER SKILLS / ABILITIES

List any machines you are skilled in using _____

- | | | | | | |
|-----------------------|------------------------------|-----------------------------|-------------------------|------------------------------|-----------------------------|
| READ MICROMETER? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | OPERATE VOLT/AMP METER? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| READ VERNIER CALIPER? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | USE TORQUE WRENCH? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| READ BLUEPRINTS? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | USE DIAL BORE GAGE | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

FOR OFFICE USE ONLY

DATE HIRED: _____ FOR DEPT. _____ POSITION: _____
WILL REPORT: _____ SALARY: _____ WAGES: _____
HIRED BY: _____