

**Personal Information**

**Drug screening: \*\*Applicant must be able to pass pre-employment Hair analysis.\*\***

<b>Date</b>				
Name (Last Name First)		Social Security No.		
Present Address		City	State	Zip Code
Have you ever been convicted of a felony or misdemeanor? Yes ___ No ___ (A criminal conviction will not automatically disqualify an applicant.) If yes please give the complete facts showing date, place, reason and dispositions in <b>Remarks Section for Applicant</b>				
<b>REMARKS FOR APPLICANT</b>				
Phone # where you can be contacted during business hours ( ) area code _____ - _____		Referred By	Are you at least 18 years of age?	
			Yes	No
Do you have a valid driver's license?	Yes	No	Do you have reliable transportation to work?	
			Yes	No
<b>**Applicant must be able to pass pre-employment Hair analysis.**</b>				

**Employment Desired**

Position		Date You Can Start		Salary Desired	
Are You Currently Employed?	Yes	No	If So, May We Inquire Of Your Present Employer?	Yes	No
Have You Ever Applied To This Company Before?	Yes	No	Where?	When?	
Location of the following			Attended	Graduate	
Grammar School					
High School					
College					
Trade, Business Or Other School					

**General Information**

<b>Subjects of Special Study/Research</b>		<b>Work or Special Training/Skills</b>	
Able to read blueprints	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Able to read calipers	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Able to read micrometers	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Ever worked in Machine/Fab environment	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If so explain skills:			
U.S. Military Or Naval Service		Rank	

**Former Employers (List Below Last Three Employers, Starting With Last One First)**

Date Month and Year	Name & Address Of Employer	Salary	Position	Reason For Leaving
From To				
From To				
From To				

**References**

Give Below The Names Of Three Persons Not Related To You, Whom You have Known At Least One Year.

Name	Address	Business	Years Known

**Authorization**

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Date \_\_\_\_\_ Signature \_\_\_\_\_

Interviewed By \_\_\_\_\_ Date \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE****REMARKS****Subjects Of Special Study/Research**

Character

Personality

Ability

Hired

Position

Shift

1st

2nd

3rd

Start Date

Starting time

Starting Wages

Scheduled Drug Test

Date

Time

Birth Date

Location for Drug test

4038 West RD Cortland

22-24 East Main Marathon