



Employment Application

Position applying for: _____

EMPLOYEE INFORMATION

Name: _____
Last First Middle

Telephone: _____ Alternate telephone: _____

Address: _____

Are you able to perform the essential functions of the position with or without accommodations? Yes No

If necessary for the job, I am able to:

Work overtime? Yes No

Provide a valid FL Driver's License? Yes No

Work the following shifts: (check all that apply)
 Any Day Night

I will be able to report to work _____ days after being notified I am hired.

My expected rate of pay is \$_____

Are you legally eligible for employment in the USA? Yes No
If yes, verification will be required.

Have you been convicted of a crime in the past ten years, which has not been annulled, expunged or sealed by a court? If yes, describe in full. Yes No

State the names of relatives or friends working for us:

Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For reference purposes, have you worked or attended school under another name? If yes, please list other name(s):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever applied here before? If yes, when?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed here before? If yes, when?	<input type="checkbox"/> Yes <input type="checkbox"/> No



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EDUCATION

Type of School	Name and Location	Did you graduate?	Field of study
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade School or Junior College		<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School		<input type="checkbox"/> Yes <input type="checkbox"/> No	

EMPLOYMENT HISTORY

Employer name and address: _____ _____ Pay: \$ _____ Per: _____	Position title/duties, skills: Supervisor: _____ Telephone: _____	Start date: _____	End date: _____
		Reason for leaving:	
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Summarize other employment related to this job:

MILITARY

Have you ever served in the military?

Yes No

Duty/specialized training: _____

SKILLS & QUALIFICATIONS

Other qualifications such as special skills, abilities or honors that should be considered:

Types of computers, software, and other equipment you are qualified to operate or repair:

Professional licenses, certifications or registrations:

Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention:

REFERENCES

List two personal references who are not relatives or former supervisors:

Name	Address	Telephone	Occupation	Years Known
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Did you complete this application yourself?

Yes No

If not, who did? _____



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INFORMATION TO THE APPLICANT

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job.

If necessary for employment, you may be required to: supply proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. You may also be subject to a job related background check. A comprehensive background check may consist of prior employment verification, professional reference checks, and education confirmation. As appropriate, a credit, criminal, health examination and/or driving record history may also be obtained.

By signing below, you certify that all the information submitted by you on this application is true and complete, and you understand that if any false information, omissions or misrepresentations are discovered, your application may be rejected.

In consideration of your employment, you agree to conform to the company's rules and regulations, and you agree that your employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either yours or the company's option. You also understand and agree that the terms and conditions of your employment may be changed, with or without cause, and with or without notice, at any time by the company. You understand that no company representative, other than its President, and then only when in writing and signed by the President, has any authority to enter into any agreement for employment for any specific period of time or to make any agreement contrary to the foregoing.

Date: _____ Signature: _____



Rate your proficiency level on the following machines

scale of 1-5 with 1 being somewhat familiar and 5 being excellent

MACHINE	OPERATE	SET UP
Band Saw		
Drill Press		
Radial Drill		
Gun Drill		
Bridgeport		
Engine Lathe		
Turret Lathe		
CNC Lathe		
Automatic Lathe		
Vertical CNC		
Tool Grinder		
Surface Grinder – Doall		
Blanchard Grinder		
ID – OD Grinder		
Welding Mig		
Welding Tig		

If you have CNC programming experience, please state the type of controller.

Machine Assembly	
Electrical	
PLC Programming	
Drafting	
CAD	
CAD CAM	

Rate your blue print reading and comprehension.