



Application for Employment

PLEASE PRINT ACCURATE ANSWERS TO ALL QUESTIONS.
THIS INFORMATION WILL BE TREATED CONFIDENTIALLY.

WE APPRECIATE YOUR INTEREST IN OUR COMPANY AND ASSURE YOU THAT WE ARE SINCERELY INTERESTED IN YOUR QUALIFICATIONS. A CLEAR UNDERSTANDING OF YOUR BACKGROUND AND WORK HISTORY WILL AID US IN PLACING YOU IN THE POSITION THAT BEST MEETS YOUR QUALIFICATIONS AND MAY ASSIST US IN POSSIBLE FUTURE UPGRADING.

NAME (LAST, FIRST, MIDDLE)	DATE
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PRESENT ADDRESS

	HOW LONG?
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PHONE NUMBER (INCLUDING AREA CODE)

HOME _____ CELL _____

HOW DID YOU LEARN ABOUT US?

EPC WEBSITE OTHER JOB WEBSITE ADVERTISEMENT EMPLOYEE

COLLEGE JOB FAIR RECRUITING AGENCY WALK-IN

OTHER _____

TO APPLICANT: READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS. WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX (INCLUDING PREGNANCY), NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED MEDICAL CONDITION OR DISABILITY, OR ANY OTHER LEGALLY PROTECTED STATUS. IF YOU REQUIRE ASSISTANCE TO COMPLETE THIS APPLICATION, YOU MAY REQUEST ASSISTANCE. WE WILL MAKE REASONABLE ACCOMODATIONS TO MEET YOUR REQUEST FOR ASSISTANCE.

PERSONAL

IF YOU ARE UNDER 18, CAN YOU FURNISH A WORK PERMIT?

YES NO

RELATIVES OR FRIENDS WORKING FOR ELKHART TRI-WENT INDUSTRIAL: LIST NAMES AND RELATIONSHIP

Blank space for listing relatives or friends working for Elkhart Tri-Went Industrial.

POSITION(S) APPLIED FOR:

EXPECTED PER MONTH:

\$

WERE YOU PREVIOUSLY EMPLOYED BY US?

IF SO, WHEN?

YES NO

IF YOU WERE OFFERED EMPLOYMENT WITH ELKHART TRI-WENT INDUSTRIAL, WHAT DATE WOULD YOU BE AVAILABLE TO REPORT FOR WORK?

MACHINE OR EQUIPMENT EXPERIENCE:

COMPUTER FORKLIFT OTHER (SPECIFY)

Blank space for listing machine or equipment experience.

DO YOU HAVE ANY OTHER EXPERIENCES, SKILLS OR QUALIFICATIONS WHICH YOU FEEL MAKE YOU QUALIFIED FOR WORK WITH THE COMPANY?

Blank space for listing other experiences, skills or qualifications.

RECORD OF EDUCATION

SCHOOL	NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	CIRCLE LAST YEAR GRADUATED				DID YOU GRADUATE	LAST DIPLOMA OR DEGREE
			5	6	7	8		
ELEMENTARY							<input type="checkbox"/> YES	
							<input type="checkbox"/> NO	
HIGH							<input type="checkbox"/> YES	
							<input type="checkbox"/> NO	
COLLEGE							<input type="checkbox"/> YES	
							<input type="checkbox"/> NO	
COLLEGE							<input type="checkbox"/> YES	
							<input type="checkbox"/> NO	
OTHER (SPECIFY)							<input type="checkbox"/> YES	
							<input type="checkbox"/> NO	
OTHER (SPECIFY)							<input type="checkbox"/> YES	
							<input type="checkbox"/> NO	

MILITARY SERVICE RECORD

WERE YOU IN U.S.ARMED FORCES? <input type="checkbox"/> YES <input type="checkbox"/> NO	PRESENT SELECTIVE SERVICE CLASSIFICATION	SELECTIVE SERVICE NUMBER
BRANCH <input type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> MARINES <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD		
RESERVE STATUS <input type="checkbox"/> NONE <input type="checkbox"/> READY <input type="checkbox"/> STAND BY <input type="checkbox"/> RETIRED		
DATE ENTERED	DATE DISCHARGED	RANK
RANK AT TIME OF DISCHARGE		
DESCRIBE MILITARY DUTIES		
HAVE YOU TAKEN TRAINING UNDER G.I. BILL OF RIGHTS? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHAT TRAINING DID YOU TAKE?	

REFERENCES (NOT RELATIVES)

NAME	BUSINESS	ADDRESS	TELEPHONE

1 LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT

COMPANY NAME	FROM (MO/YR)	TO (MO/YR)	STARTING SALARY	LAST SALARY	NAME OF SUPERVISOR
ADDRESS	DESCRIBE IN DETAIL THE WORK YOU DID				TELEPHONE
CITY, STATE, ZIP					REASON FOR LEAVING
TYPE OF BUSINESS					

2

COMPANY NAME	FROM (MO/YR)	TO (MO/YR)	STARTING SALARY	LAST SALARY	NAME OF SUPERVISOR
ADDRESS	DESCRIBE IN DETAIL THE WORK YOU DID				TELEPHONE
CITY, STATE, ZIP					REASON FOR LEAVING
TYPE OF BUSINESS					

3

COMPANY NAME	FROM (MO/YR)	TO (MO/YR)	STARTING SALARY	LAST SALARY	NAME OF SUPERVISOR
ADDRESS	DESCRIBE IN DETAIL THE WORK YOU DID				TELEPHONE
CITY, STATE, ZIP					REASON FOR LEAVING
TYPE OF BUSINESS					

ADDITIONAL PREVIOUS JOBS - LAST COMPANY AND EMPLOYMENT DATES

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MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF NOT, INDICATE BY NUMBER WHICH ONE(S) YOU DO NOT WISH US TO CONTACT
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IN CASE OF EMERGENCY, NAME, ADDRESS AND PHONE NUMBER OF PERSON TO BE CONTACTED
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In consideration of my employment, I agree to conform to the company's rules and regulations, and that my employment and compensation can be terminated with or without notice, at any time at either my option or the company's. I understand that neither this document nor any offer of employment from Elkhart Tri-Went Industrial constitute an employment contract unless a specific document to that effect is executed by Elkhart Tri-Went Industrial and the employee in writing.

The facts set forth above in my application for employment are true and complete. I understand that if employed, false statements on this application or interview(s) shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

I am aware that post-offer drug testing is required and all employment offers are contingent upon successfully passing this drug test.

_____ Signature of Applicant