

Stanton Automatics

APPLICATION FOR EMPLOYMENT

Please TYPE or PRINT clearly. *This application must be completed and signed personally by the applicant.* Each question must be answered in full. If answer is NO or NONE, indicate same. We appreciate your interest in our organization.

This company subscribes to all Federal and State statutes which prohibit discrimination. We consider all applications for all positions without regard to race, color, religion, gender, national origin, age, disability, marital status, veteran status, or any other legally protected status.

NAME:	Last	First	M.I.	Social Security Number
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PERMANENT ADDRESS:

City	State	Zip	Telephone Number
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1. Are you eighteen (18) years of age or older? yes no
2. Are you employed now? yes no
If so, may we inquire of your present employer? yes no
3. Position applied for: _____ Rate of pay expected \$ _____ /wk
4. Other position(s) qualified for: _____
5. Are you legally eligible for employment in the United States? yes no
6. Check shift(s) you can work: Full-Time Part-Time Day Evening Night
7. Special Licenses or Certifications _____
Expiration Date _____
8. Have you been convicted of a felony or misdemeanor in the past seven (7) years? yes no
If yes, please list the specific nature and details of the crime(s), date(s), court location, sentencing information, and disposition of sentence on the attached sheet of paper. (Please note: a conviction record will not necessarily be a bar to employment)
9. Have you ever been employed by this company? yes no
10. **Americans with Disabilities Act Clarification:** If a job description has been provided, with or without reasonable accommodation, can you perform the essential job functions for the position you have applied for? yes no

EDUCATION:

Circle Highest Grade Completed:	Grade School	High School	College	Graduate
	1 2 3 4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
	Name and Location		Course	Degree

High School _____

College _____

Other Graduate, Business or Vocational School, or Other Training Skills: _____

Military Service Branch: _____ Years Served: _____ Rank: _____

see over

EMPLOYMENT RECORD (List most recent first)

Name of Company _____ Address _____ Phone _____

Dates of Employment: From _____ To _____ Salary Start: \$ _____ per _____

Type of Business: _____ Last: \$ _____ per _____

Your Position/Title _____ Supervisor _____

Reason for Leaving _____

Briefly Describe Your Duties and Responsibilities: _____

Name of Company _____ Address _____ Phone _____

Dates of Employment: From _____ To _____ Salary Start: \$ _____ per _____

Type of Business: _____ Last: \$ _____ per _____

Your Position/Title _____ Supervisor _____

Reason for Leaving _____

Briefly Describe Your Duties and Responsibilities: _____

Name of Company _____ Address _____ Phone _____

Dates of Employment: From _____ To _____ Salary Start: \$ _____ per _____

Type of Business: _____ Last: \$ _____ per _____

Your Position/Title _____ Supervisor _____

Reason for Leaving _____

Briefly Describe Your Duties and Responsibilities: _____

Explain and give details of any period of unemployment longer than 30 days: (Use additional sheet)

REFERENCES: (Other than relatives or former employers) (List Three)

Name	Complete Address	Phone	Occupation	Years Known
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

After a conditional offer of employment, I understand that a pre-employment drug screen must be passed to our satisfaction before starting work. I authorize investigation of any information provided on this application. I also authorize investigation of my employment record and references. I understand that any misrepresentation is cause for voiding this application or termination of employment if hired. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages or salary, be terminated at any time without any prior notice.

Date _____ Signature of Applicant _____

Addendum to employment application

Additional information regarding question #8. Conviction Record. If you answered Yes, and have been convicted of a felony or misdemeanor in the past seven (7) years, please provide additional information such as the date of the offense, the seriousness and nature of the offense, and rehabilitation completed.

Applicant Signature: _____ Date: _____

(Please note: The organization reserves the right to reject individuals for employment regarding job related convictions. A conviction record will not necessarily be a bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account).