

APPLICATION FOR EMPLOYMENT

Applicants will be subject to pre-employment drug testing.
Yanke Machine Shop is a Drug-Free Workplace.

Manufactured by Alexander Clark Business Forms - Boise, Idaho - (208) 322-0611

PERSONAL INFORMATION

DATE _____

NAME

Last

First

Middle

PRESENT ADDRESS

ALTERNATE ADDRESS

City

State

Zip

PHONE NO. ()

Email:

City

State

REFERRED BY

GENERAL

WHAT FOREIGN LANGUAGES DO YOU SPEAK FLUENTLY?

READ

WRITE

U.S. MILITARY OR
NAVAL SERVICE

RANK

U.S. Citizen? Yes No

If No, are you legally allowed to work
in the U.S.? Yes No

If Yes, how long? _____

If employment is offered, I certify that I am a U.S. Citizen, permanent resident,
or a foreign national with authorization to work in the United States?

Yes No

I realize that any offer of employment able to produce certain documentation
to verify identity?

Yes No

What date are you available for employment?

Have you ever applied for a position with this Company? Yes No

Location

When

Are you presently on layoff or leave of absence from any other company? Yes No If yes, explain here:

EDUCATION

TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	MAJOR(S) OR COURSE	CIRCLE LAST YEAR COMPLETED				GRADUATE? <input type="checkbox"/> Yes <input type="checkbox"/> No	GIVE DEGREE(S)	CUM G.P.A. SCALE (IE) 4.0, 5.0	STILL ATTENDING? <input type="checkbox"/> Yes <input type="checkbox"/> No	LAST YEAR ATTENDED
			5	6	7	8					
Elementary											
High School											
College											
Graduate School											
Business or Trade School											
Correspondence or Night School											
Other job-related educational institutions											

WORK PREFERENCES

Answer only the questions that apply to you and the position for which you are applying.

What type of employment do you want?

Full-time

Part-time

Summer

Will you work shifts?

For what type of position are you applying?

Are you willing to travel? Yes No

What percent of the time?

Can you type? Yes No

W.P.M.

Are you willing to relocate? Yes No

What is your minimum salary requirement?

Can you keypunch? Yes No

W.P.M.

(CONTINUED ON OTHER SIDE)

EMPLOYMENT HISTORY (LIST BELOW CURRENT AND PREVIOUS EMPLOYERS, STARTING WITH CURRENT OR LATEST EMPLOYER FIRST)

DATE MONTH AND YEAR	EMPLOYER NAME, ADDRESS AND PHONE	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
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	Phone No. / City, State	BUSINESS	YEARS KNOWN
1.			
2.			
3.			

As an applicant for employment, I understand the following:

- All information is subject to verification.
- Any misrepresentation or falsification of information requested here will be cause for rejection of this application or for subsequent discipline up to and including my dismissal from employment.
- If my application for employment is accepted, the effective date of my employment shall be the time I actually begin to work. If I am employed, I agree to comply with and be bound by the safety and health rules and regulations of the company.
- My employment is not guaranteed for any term, and that my employment may be terminated by the company or myself for any reason.
- No management official is authorized to make any oral assurance or promise of continued employment.
- I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information.
- I agree to submit to any lawful drug testing that may be required as a condition of employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge.
- I understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. citizen status, or, if aliens, their legal authorization to work in the U.S. Therefore, I realize that any offer of employment would be contingent upon my ability to produce the required documentation within the time period required by law.

DATE SIGNATURE

INTERVIEWED BY

DO NOT WRITE BELOW THIS LINE

DATE

REMARKS:

NEATNESS		CHARACTER	
PERSONALITY		ABILITY	

HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY WAGES
APPROVED: 1.		2.		3.
	EMPLOYMENT MANAGER	DEPT. HEAD		GENERAL MANAGER

This Company will not discriminate against any employee or applicant for employment because of age, religion, sex, race, color, national origin, disability, non-job-related handicap, or because they are a disabled veteran or Vietnam era veteran. Answers to application questions will be utilized for applicable, job-related information only.

The manufacturer of this form assumes no responsibility and hereby disclaims any liability for the inclusion in this form, of any questions upon which a violation of State and Federal Laws may be based.