

## APPLICATION FOR EMPLOYMENT

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position Applied for					
Are you a citizen of the United States?		YES <input type="checkbox"/> NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?		YES <input type="checkbox"/> NO <input type="checkbox"/>		If so, when?	
EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
REFERENCES					
<i>Please list three professional references.</i>					
Full Name			Relationship		
Company			Phone (    )		
Address					
Full Name			Relationship		
Company			Phone (    )		
Address					
Full Name			Relationship		
Company			Phone (    )		
Address					

PREVIOUS EMPLOYMENT			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact this employer for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact this employer for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact this employer for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact this employer for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

RESIDENCE HISTORY (5 YEARS)			
NAME	ADDRESS	STATE	DATE (s) OF RESIDENCE
1			
2			
3			
4			
5			

## **Applicant's Certification and Agreement**

By my signature below, I promise that the information provided in this employment application (and in any related documents or interview) is true and complete. I understand that any false or misleading information or significant omissions may disqualify me from further consideration for employment, and may lead to my dismissal from employment, if discovered at a later date.

I understand that applicants for employment consent to a criminal background check. In certain positions you will be required to successfully complete a pre-employment motor vehicle record check prior to any final offer.

I expressly authorize investigation by American Manufacturing Co., its agents and representatives of all statements, references, and information provided in this application (or in any related documents or interview).

I expressly authorize any person, school, current or prior employer named in this form (or in any related documents or interview) to provide any information or opinion requested by American Manufacturing Co., its agents and representatives in connection with my application, and I release all parties from liability in making such statements.

I understand that this application does not create a contract for employment. I understand that, if hired, I am obliged to comply with any and all current and subsequently adopted company policies. I understand and agree that ,if hired, my employment is for a definite period and may be terminated at any time, at the will of either party with or without cause and with or without prior notice, except as may be required by law . I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States.

**I certify that I have read, fully understand and accept the above terms.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date