

APPLICATION FOR EMPLOYMENT

Personal Information

Date _____

| | | | |
|------------------------|--------|-----------------------|-------|
| Name (First, Last, MI) | | Social Security No. | |
| Present Address | | City | State |
| Zip Code | County | Municipality/Township | |
| Phone No. | | Date of Birth | |

Employment Desired

| | | |
|---------------------------|--|----------------|
| Position | Date You Can Start | Salary Desired |
| Are You Employed Now? | If so, may we contact your present employer? | |
| Ever Applied Here Before? | When? | |

Education History

| | |
|---|-------------------|
| High School: Name, Location, Years Attended | Did You Graduate? |
| Higher Education: Name, Location, Years Attended, Major | Did You Graduate? |
| Higher Education: Name, Location, Years Attended, Major | Did You Graduate? |
| Higher Education: Name, Location, Years Attended, Major | Did You Graduate? |

General Information

| | |
|--------------------------------------|---|
| Do you have a driver's license? | Do you have reliable transportation? |
| Are you willing to take a drug test? | Are you willing to take a weld test? (If applicable) |
| Special Skills | |
| US Military or Naval Service | |

Employment History

| | | | |
|------|------------------|---------------------|--------------------|
| From | Name of Employer | Position and Salary | Reason for Leaving |
| To | | | |
| From | Name of Employer | Position and Salary | Reason for Leaving |
| To | | | |
| From | Name of Employer | Position and Salary | Reason for Leaving |
| To | | | |

CONTINUED ON OTHER SIDE

References

| | |
|----------------------------|------------|
| Name, Number, and Business | Yrs. Known |
| Name, Number, and Business | Yrs. Known |
| Name, Number, and Business | Yrs. Known |

Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the Jelke's Fabrication Co. Inc. has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment."

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document upon hire.

_____ Date

_____ Signature

DO NOT WRITE BELOW THIS LINE

Notes
