

MIDWEST METAL PRODUCTS INC.

EMPLOYMENT APPLICATION:

It is the policy of this company to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental handicap or veteran status.

Note: Please type or print your answers. If you print, please do so in blue or black ink and write neatly. An illegible application may preclude you from consideration. POSITION APPLYING FOR If KNOWN:							
PERSONAL INFORMA	TION						
First Name	Middle Initial	Las	st Name				
Current Address:							
Street and Apt. #	City	State	Zip Code	_			
Permanent Address (if different f	rom above):						
Street and Apt. #	City	State	Zip Code				
Telephone:	E-I	mail:		-			
Driver's License #:	State:						
BE REQUIRED THE UNITED S	TO VERIFY IDENTI TATES AND TO CO	TY AND ELIGII OMPLETE THE	RSONS HIRED WILL BILITY TO WORK IN REQUIRED CUMENT FORM UPON				

✓ AT THE COMPANY'S DISCRETION A BACKGROUND CHECK WILL

BE RUN ON APPLICANTS/POTENTIAL HIRES.

Last name:

EMPLOYMENT HISTORY:

Present or Most Recent Employer	
Employer:	Address:
Your Position:	Wage/salary:
Duties:	
Dates of Employment: to	
Supervisor: Name	May we contact? ☐ Yes ☐ No Title
Reasons for	
Leaving:	
Prior Employer	
Employer:	Address:
Your Position:	Wage/salary:
Duties:	
Dates of Employment:to	
Supervisor:	May we contact? ☐ Yes ☐ No
Name	Title
Reasons for	
Prior Employer	
Employer:	Address:
Vaus Backlan	Westfalan
Your Position:	Wage/salary:
Duties:	
Dates of Employment:to _	
Supervisor:	May we contact? ☐ Yes ☐ No
Name	Title
Reason for leaving:	
Have you ever been employed by this company	? □ Yes □ No
If so, when:	

Last name:				
EDUCATION				
High School				
Name and Address				
Did you graduate? ☐ Yes ☐ No				
If you did not graduate, number of years attended				
Did you receive your GED? ☐ Yes ☐ No				
Special honors or	awards:			
Technical or Vocat	tional School			
Name and Address				
Did you graduate?	□ Yes □ No			
Degree or Certifica	ation: Specialty:			
Special honors or	awards:			
College or Univers Name and Address				
Did you graduate?				
	Major:			
Special honors or a	awards:			
RESTRICTIONS				
Have you ever rece	eived compensation for an occupational injury or illness?			
lf yes, please expla	☐ Yes ☐ No			
	vill require lifting heavy objects (50-60 lbs). Do you have any restrictions ty? ☐ Yes ☐ No			
lf yes, please expla	ain:			

Last name:					
POSITION INFORMATION:					
Position Specifications					
Position Applying For:					
How did you hear about this job?					
In addition to 40 hours a week, are you willing to work overtime?	□ Yes	□ No			
Would you be able to work weekends?	□ Yes	□ No			
Are you willing to work 2 nd shift (9:00pm – 5:30am)?	□ Yes	□ No			
When would you would you be able to start?					
Skills					
Please describe any specialized skills you may have:					
✓ In compliance with federal law, all persons h					
verify identity and eligibility to work in the Un complete the required employment eligibility					
form upon hire.					
I hereby certify that my answers and assertions set forth in this a					
to the best of my knowledge. If I am employed, I understand that any false statements on this application shall be considered sufficient cause for my dismissal. I hereby authorize this company					
to investigate any aspect of my prior educational and employment history.					
Furthermore I understand that if I am hired, employment with this company is "at will," which means that either the company or I can terminate my employment for any reason not prohibited by state or federal law.					
Signature:	Date				