

APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE PAG	 ES 1-3		DATE:				
Nama							
Name	Last	First	Middle	Maiden			
Present address							
		Street City	State Zip				
How long at present address	s?	Social	Security No				
Telephone ()	If Under 18, please list age						
Position applied for							
and salary desired							
(Be specific) How many hours can you we	ecific) Do you need to give notice to your present employer? Yes No nany hours can you work weekly?						
Employment Type desired (check one) Full Time Only Part Time Only Full or Part Time Temporary							
Shift desired (d	check one)	□ Night Shift	☐ Weekend SI	hift			
Have you ever worked for the	is company before? 🛭 Yo	es 🛘 No If yes, whe	en?				
Are you a citizen of the United States? Yes No If not, are you legally allowed to work in the United States? Yes No							
EDUCATION							
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE	GRADUATED?		
High School		addi 655)	OOM ELTED		☐ Yes ☐ No		
College					☐ Yes ☐ No		
-							
Bus. or Trade School					☐ Yes ☐ No		
Professional School					☐ Yes ☐ No		
HAVE YOU EVER BEEN CONVICTED OF A FELONY CRIME? □ No □ Yes							
If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. Use separate sheet if necessary.							
•		·					
DO YOU HAVE A DRIVER'S LICENSE?							
What is your means of transportation to work?							
Driver's license number State of issue Doperator							
Expiration date							
MILITARY HAVE YOU	J EVER BEEN IN THE AR	RMED FORCES?	☐ Yes ☐ No				
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?							

Date Entered

Discharge Date



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WORK EXPERIENCE – Summarize your special skills or qualifications:							
Can you set up machining equipment? ☐ Yes ☐ No If so, which	n type(s)?						
Can you program machining equipment? ☐ Yes ☐ No If so, which type(s)?							
Experience	ence						
Attach additional sheets if necessary.	T	1					
Name of employer	Name of last supervisor	Employment dates	Pay or salary				
Address		From	Start				
City, State, Zip Code		То	Final				
Phone number	Your last job title						
Reason for leaving (be specific):							
List the jobs you held, duties performed, skills used or learned, adv	vancements or promot	ions while you worked	at this company.				
May we contact this employer for a reference? ☐ Yes ☐ No ☐ If `	Yes, Name:	Phon	ne #:				
Past Work Please list your second most recent work experience in the past five years. If you were self-employed, please give firm name. Attach additional sheets if necessary.							
Name of employer	Name of last supervisor	Employment dates	Pay or salary				
Address		From	Start				
City, State, Zip Code		То	Final				
Phone number	Your last job title						
Reason for leaving (be specific):							
List the jobs you hold duties perfermed skills used as learned salvanesseets or mass time while you had at this as							
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.							
May we contact this employer for a reference? ☐ Yes ☐ No ☐ If `	Yes, Name:	Phon	ne #:				



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Past Work Experience Please list your third most recent work exfirm name. Attach additional sheets if		years. If you were sel	f-employed, please give			
Name of employer	Name of last supervisor	Employment dates	Pay or salary			
Address		From	Start			
City, State, Zip Code		То	Final			
Phone number	Your last job title		l			
Reason for leaving (be specific):						
List the jobs you held, duties performed, skills used or learned,	advancements or promo	ntions while you worked	at this company.			
Elst the jobb you hold, duties performed, skills used of rearries	, advancements or prome	Money willie you worked	at this company.			
May we contact this employer for a reference? ☐ Yes ☐ No	If Yes, Name:	Phor	ne #:			
may we contact this displayer for a reference: 2 165 2 16	ii res, ivaiie.	1 1101	π.			
Did you complete this application yourself ☐ Yes ☐ No	If not, who did?					
APPLICATION FORM WA	IVER – PLEASE READ	CAREFULLY				
In exchange for the consideration of my job application by Performance Machine Technologies (hereinafter called "the Company"), I agree that:						
Neither the acceptance of this application nor the subsequent of applied for or any other position, and regardless of the contents statements, and the like as they may exist from time to time, or contract of employment, or to confer any right to remain an ememployment-at-will relationship between it and the undersigned signed by the President /General Manager of the Company. Be relationship at any time, without specified notice or reason. If the revise their benefits, policies and procedures and such change	s of employee handbooks rother Company practices ployee of the Company, od, and that relationship ca oth the undersigned and employed, I understand the	s, personnel manuals, to s, shall serve to create or otherwise to change annot be altered except the Company may end that the Company may u	enefit plans, policy an actual or implied in any respect the by a written instrument the employment			
I authorize investigation of all statements contained in this applicalled for is cause for dismissal at any time without any previou previous employers (unless otherwise indicated), references, a of such contract.	us notice. I hereby give the	ne Company permission	n to contact schools,			
I also understand that the Company has an Employee Manual understand that consent to and compliance with such policies i			and alcohol use. I further			
I understand that, in connection with the routine processing of agency an investigative consumer report including information characteristics, and mode of living. Upon written request from the nature and scope of any such report requested by it, as reconstructions.	as to my credit records, ome, the Company, will pr	character, general reput ovide me with addition	ation, personal			
I further understand that my employment with the Company sh time during the probationary period or thereafter, my employmenty.						
Signature of applicant:	Date:					
This Company is an equal employment opportunity employer. race, color, religion, sex, sexual orientation, national origin, citiz employment with this Company depends solely on your qualific	zenship, age or disability.	making employment de We assure you that yo	ecisions without regard to our opportunity for			

Thank you for completing this application form and for your interest in our business.