# **APPLICATION FOR EMPLOYMENT**

Please print in ink. You must complete entire application.

Position(s) applie	d for(R	equired)	Date of App	lication_		
Referral source:	Walk-in	Employee Relative	Advertisement Govt. Employment Name of source			
Name Last Previous name, as			First n previous employmen	ıt and/or	Midd school	
Address: Stree	et		City	State	Z	ip Code
Day Telephone #	( )	Eve	ening Telephone # (	)		
Are you legally at (If hired, you will be		ork in the U.S? de proof of work author	orization)		Yes	No
	nent will be subje		you meet state/federal mini obtained a valid work peri		Yes	No
Date available for	work		Desired salary rang	ge \$		
If yes, describe the; 1 3) county and state w	nature of the characteristics ) nature of the characteristics.	s or have you ever parges/conviction, 2) d		rime?	Yes	No
Have you ever ap	plied at this co	ompany before?			Yes	No
	•		Position			
Have you ever wo If yes, give dates:		ompany before?			Yes	No

### **EMPLOYMENT HISTORY**

Provide the following information for your past and current employers, assignment or volunteer activities, starting with the most recent. Explain any gaps in employment in comments section below.

Name of Employer	Telephone ( )
Address	
x 1 m/d	
Job Title	Employment Dates (month and year)
Name of Immediate Supervisor	From: To:
Description of Duties	
	Reason for Leaving
Starting Salary \$ Ending Salary \$	
If currently employed, may we contact as a reference?	□ Yes □ No
Name of Employer	Telephone ( )
Address	. /
Job Title	Employment Dates (month and year)
Name of Immediate Supervisor	From: To:
Description of Duties	
	Daggar for Lagying
Starting Salary \$ Ending Salary \$	Reason for Leaving
Ending Sulary $\psi$	
If currently employed, may we contact as a reference?	☐ Yes ☐ No
in currently employed, may we contact as a reference:	□ 1C5 □ 1V0
Name of Employer	Telephone ( )
Address	
Job Title	Employment Dates (menth and year)
Name of Immediate Supervisor	Employment Dates (month and year) From: To:
Description of Duties	10iii. 10.
Description of Dunes	
	Reason for Leaving
Starting Salary \$ Ending Salary \$	
If currently employed, may we contact as a reference?	□ Yes □ No

# **Employment History (Continued)**

Name of Employer	Telephone ( )
Address	
Job Title	Employment Dates (month and year)
Name of Immediate Supervisor	From: To:
Description of Duties	
Starting Salary \$ Ending Salary \$	Reason for Leaving
If currently employed, may we contact as a reference?	□ Yes □ No
N	T-11( )
Name of Employer Address	Telephone ( )
Address	
Job Title	Employment Dates (month and year)
Name of Immediate Supervisor	From: To:
Description of Duties	
	D C I :
Starting Salary \$ Ending Salary \$	Reason for Leaving
Ending Sulary \$	
If currently employed, may we contact as a reference?	□ Yes □ No
J 1 J / J	
Name of Employer	Telephone ( )
Address	
Job Title	Employment Dates (month and year)
Name of Immediate Supervisor	From: To:
Description of Duties	Trom.
	Reason for Leaving
Starting Salary \$ Ending Salary \$	
If currently employed, may we contact as a reference?	□ Yes □ No
	100 110
Comments (including explanation of any gaps in empl	
Comments (including explanation of any gaps in empl	
Comments (including explanation of any gaps in empl	
Comments (including explanation of any gaps in empl	

### EDUCATIONAL BACKGROUND

School Name	e and Location (City, State)	Nbr. Years Attended	Major Subjects	Diploma or Degree
High School				□ Yes □ No
				(proof will be required)
College				□ Yes □ No
				Type:
Graduate				□ Yes □ No
				Type:
Other				□ Yes □ No
(Specify)				Type:
List individua	ENT REFERENCES als familiar with your job quali			onal friends)
Name			Telephone ( )	
Address		Eveni	ng Telephone ( )	
Relationship		<u>'</u>		
Name		<b>Day</b> Т	Selephone ( )	
Address		Eveni	ng Telephone (	
Relationship				
Name		Day T	Selephone ( )	
Address			ng Telephone ( )	
Relationship				
color, religion, s	ccomplishments, publications, sex, national origin, citizenship, age, illarly protected status.)			
List any addit	tional information you would li	ike us to coi	nsider	

#### Please Read Carefully Before Signing This Form

I certify that the answers given by me in this application are true and correct without omissions of any kind. I understand that any misleading or incorrect statements may render this application void. If I am employed and it is subsequently discovered that any answer given by me is incomplete, misleading or incorrect, I may be terminated because of false, incomplete or misleading statements, answers or omissions made by me in this application.

I authorize pertinent companies, schools, agencies, municipalities or persons to give to Felker Brothers Corporation any information requested regarding my employment, character, experience and qualifications and/or suitability for employment with Felker Brothers Corporation. I understand Felker Brothers Corporation may request a signed Consent Form for Background Check at a later date should I be considered for an interview for the purposes of considering my suitability for hire. I hereby forever release, discharge and covenant not to sue any person or organization for any result of providing, obtaining or acting upon such information I understand that such information is sought with confidentiality and will not be released to me in any form whatsoever.

I understand upon receiving a job offer, a drug screening will be required. Employment is contingent upon drug results being negative. Additional post-offer medical testing will be required if my job includes the wearing of a respirator. I consent to all such testing as a condition of my employment, if required.

Regardless of whether or not I become employed by the company, I recognize this application is not and should not be considered a contract of employment. I understand employment at this company is on an at-will basis and my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's unless specifically provided otherwise in a written employment contract. I further understand no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed written document.

This application is current for only 180 days and is only effective for the position applied for. At the conclusion of the 180 days, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I represent and warrant th under these conditions.	at I have read and fully under	stand the foregoing and seek employme	nt
Signed by Applicant		Date	
· · · · · ·	Signature Required		_

Thank you for your interest in Felker Brothers Corporation.

## **Affirmative Action Voluntary Information**

#### COMPLETION OF INFORMATION BELOW IS VOLUNTARY

We consider all applicants for positions without regard to race, color, religion, sex, national origin, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is STRICTLY VOLUNTARY. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is not a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

	1	11	S	
PLEASE PRINT				
Position(s) applied for			Date	
Referral Source				
☐ Walk-In ☐ Private Employment Agency	☐ Employee ☐ Govt. Employment Agency	☐ Relative ☐ Advertisement	□ School nt - Source	□ Other
Applicant Information				
Name			☐ Male ☐ Female	
Last	First	Middle		
Address: Street	City State	Zip Code	Telephone ()	
<ul> <li>☐ White (not of Hispanic origin)</li> <li>☐ American Indian/Alaskan Nat</li> <li>For Administrative Use O</li> </ul>		☐ Two or more	ican American (not of Hispanic of races	origin)
Position(s) applied for	Available □ Not Availab  Position hired for			
	listed below, which one best desc			
☐ Executive	☐ Technicia	ns	☐ Operatives	
<ul><li>☐ First/Mid Officials</li><li>☐ Professionals</li></ul>	☐ Sales Workers ☐ Admin. Support		☐ Laborers (u☐ Service Wo	/
L Floressionars		kers (skilled)	□ Service wo	ireis
Notes		,		
Completed by			Date	