

# Application for Employment EQUAL OPPORTUNITY EMPLOYER

#### **Personal Data**

Name (last, first, middle)			Date				
Address							
City			State		Zip Code		
Home Phone ( )			Message / Cell Phone ( )				
If employed by	y Union Spec	cial, can you prov	ride proof of author	rization to work in	the U.S.?	□ Yes □ No	
Position(s) app	olying for:						
Referred by	□ Ad	☐ Friend	☐ Relative	☐ Agency	□ Other		
Education 1	Record						
High Schoo	ol						
Address							
Did you gradu	ate?	Yes □ No					
Trade or To	echnical T	raining					
Address							
Degrees or Dip	plomas						
College or 1	University						
Address							
Degrees or Dip	olomas	Years Attended	1 2 3 4				

# **Special Skills**

Summarize any special skills or qualifications that you acquired through employment or other experience that are applica to the job that you are applying for:						
Manufacturing Technical Skills						
Can you read and understand part drawings used for the manufacture of machined parts? Have you used and/or do you understand how to use a micrometer? Have you used precision instruments such as a dial indicator, sine plate, dial bore gauges, etc.?		Yes Yes Yes	<ul><li>□ No</li><li>□ No</li><li>□ No</li></ul>			
Have you set-up and/or operated any of the following machines tools?  Multi-Spindle Drill Press  Milling Machine (vertical or horizontal)  Surface Grinder  OD Grinder  ID Grinder  CNC Vertical Machining Center  CNC Horizontal Machining Center  CNC Turning Center  CNC Laser  CNC Wire EDM  Boring Machine  Turret Lathe		Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	□ No			
Do you have any assembly experience? Do you have any experience with sewing machines?		Yes Yes	□ No			

### **Employment History**

Begin with most recent employer. Attach additional sheet if needed. 1. Employer Dates of Employment Address Phone ( Title/Duties Manager's Name Reason for Leaving Dates of Employment 2. Employer Address Phone ( ) Title/Duties Manager's Name Reason for Leaving 3. Employer Dates of Employment Address Phone ( ) Title/Duties Manager's Name Reason for Leaving

## **Personal Data (continued)**

Have you been employed at Union Special before?	□ Yes □ No							
Do you have any relatives currently employed by Union Special?	□ Yes □ No							
Do you know any other employees at Union Special?	□ Yes □ No							
Are you capable of lifting up to 50 lbs. at a time throughout the day?	□ Yes □ No							
Are you willing to work 2 <sup>nd</sup> or 3 <sup>rd</sup> shift?	□ Yes □ No							
May we contact your current employer?	□ Yes □ No							
Have you ever been in the Armed Forces?	□ Yes □ No							
Position or Rank: Start Date:	Discharge Date:							
Are you now a member of the National Guard?	□ Yes □ No							
Applicant's Signature								
I certify that all of my answers given here are true and complete to the best of my knowledge, and that supplying false information herein shall result in immediate disqualification for consideration for employment or termination from employment, regardless of when such false information is discovered. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision; and I hereby agree to indemnify and hold harmless each and every current or prior employer in defending against any charge, complaint or suit filed with any Federal, State or local agency, or in any court of the State or Federal government for providing an accurate, factual history of employment information. I understand that neither this document nor any offer of employment from the employer constitutes an employment contract, unless a specific document to that effect is executed by the employer and employee in writing.								
Signature of Applicant	Date							
THIS SECTION FOR INTERVIEWER	INTERVIEWER / HR NOTES							
Interviewed by: Proposed hire date: Dept. to start employment: Type of Employment: (Full, PT, Temp) Shift: Craft – Grade: Job Title: Wage:								