



Employment Application

We are an Equal Opportunity Employer

Date: _____

Applicant Information

Please print in ink. You must complete entire application.

Name _____ Social Security # _____
Last First Middle

Address _____
Street City State Zip Code

Phone _____ Email Address _____
Home Cell

Are there other names under which you have worked or attended school? If yes, please list for reference checking purposes.

Have you ever applied at this company before? Yes No If yes, when? _____

Have you ever worked at this company before? Yes No If yes, when? _____

Are you at least 18 years old? Yes No

If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work for which you are applying, and have obtained a work permit.

Are you legally authorized to work in the United States? Yes No

(If hired, you will be required to provide proof of work authorization.)

Have you ever been convicted of a crime (including all misdemeanors and felonies) or pleaded no contest for any offense or violation other than minor traffic violations?

Yes No If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted.

Convictions are not an automatic bar to employment.

Do you have any pending criminal charges against you? Yes No

If yes, explain the 1) nature of the charges, 2) date issued, and 3) county and state where issued.

Referral Source

Please check the appropriate category and name the source.

Internet

- KMC Website
- Milwaukee Jobs
- WI Job Center
- Craig's List

Newspaper

- Ozaukee Press
- Daily News
- Guide/Advantage
- Post
- News Graphic
- Employment Times
- Weekend Post

Radio

School (Name) _____

Employee Referral _____

Position Applying For

Date available for work:	Part-Time or Full-Time:	Salary Preference:	Shift Preference:
Will you relocate if required?	Will you travel if job requires it?	Position Title:	

Education

School (Name and Location, city, state)	Years Completed	Major/Minor/Course of Study	Diploma or Degree Rec'd
High School			
College			
Graduate			
Other (Specify)			

Training

List any relevant training programs completed.

Course / Seminar	Organization	Subject	Date(s) Attended

Skills & Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying, including computer skills, software proficiency, etc.

Employment History

Starting with your most recent employer, provide the following information. "See Resume" not acceptable. List positions held for the past ten years. Use additional paper if necessary.

Name of Employer	Telephone
Address	Dates Employed
Job Title	Compensation (starting) \$
Immediate Supervisor	Compensation (final) \$
Description of Duties	
Reason for leaving	
What did you enjoy most about your position?	
What did you like least about the position?	

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Employment History *continued*

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Explain any gaps in your employment, other than those due to personal illness, injury or disability.

Have you ever been fired or asked to resign from a job?

Yes

No

If yes, please explain:

References

List individuals of business/work references who are not related to you and who are not personal friends.

Name	Title	Relationship	Telephone	Number of Years Known

Please read carefully before signing this form.

Applicant Statement

I certify that all information I have provided in this application is true, complete and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.

I authorize the company to investigate my responses on this application and to contact any and all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.

I understand that upon receiving a job offer, a physical examination and drug screening may be required.

Regardless of whether or not I become employed by the company, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that 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 that 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 of the company, and then only by means of a signed, written document.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employment or may result in immediate termination of employment, whenever it is discovered.

I understand that this application remains current for 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

Signed by Applicant

Date

Thank you for your interest in our company.

Authorization And Release

All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may be cause for rejection or may be cause for subsequent dismissal if I am hired.

I voluntarily and knowingly authorize any former employer, person, firm, corporation, organization, school, or government agency, its officers, employees and agents, to release all information concerning my former employment, and to release requested academic records and public record information, to said prospective employer, its officers, employees and agents, or any other person or entity making a written or oral request for such information on behalf of this employer. I understand the employment information may include, but is not necessarily limited to performance evaluations and reports, job descriptions, disciplinary reports, letters of reprimand, opinions, and public record information, regarding my suitability for employment possessed by it. I recognize a copy of this authorization and release is as valid as the original and should be considered as such.

I voluntarily and knowingly, fully release and discharge, absolve, indemnify and hold harmless such former employer, person, firm, corporation, school or government agency, its officers, employees and agents from any and all claims, liability, demands, causes of action, damages, or costs, including attorney's fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release except for the malicious and willful disclosure of derogatory facts concerning my employment made for the express purpose of preventing me from obtaining employment which the officer, employee or agent disclosing such facts knows are untrue.

Signature

Date

Witness Signature

Date

*** Please complete sections marked by an asterisk.**

For reference checking purposes only, please complete the following information (please print):

May your current supervisor, and/or any references or individuals associated with your current employer (including Human Resources) be contacted?

Yes

No

Specific Comments: _____

*** Social Security Number (required to obtain academic verifications):** _____

Former or alternate names(s) such as change of last name, and/or use of assumed last name or nickname in order to locate your employment and/or school records.

Name, city & state, dates of attendance or graduation and phone numbers from:

High School _____

College _____

Technical School _____

Other _____

*** This information is required to conduct a criminal background check.**

Date of Birth: _____

Note: Answer this question only if instructed by hiring employer. This information is required to conduct a driver's license check.

Driver's License Number: _____

State: _____