



Employment Application

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: (____) _____ Cell Phone: _____

Date Available: _____ E-Mail _____ Desired Salary: \$ _____

Position Applied for: _____ Willing to work -Shift: _____ 1st _____ 2nd

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Referred by: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.



References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Previous Employment

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO



Applicant's Statement and Signature

I certify that my answers are true and complete to the best of my knowledge.

I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not an applications are being accepted at that time.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

The applicant understands that the application process may involve a physical examination which includes tests of the applicant's vision and hearing. The applicant voluntarily consents to these tests and will cooperate with the employer in the taking of the tests. The employer will use the test results only for job-related purposes, in accordance with applicable federal and state laws.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I understand that Berkshire Industries, Inc. follows an "employment at will" policy, in that I or Berkshire Industries, Inc. may terminate my employment at any time, or for any reason consistent with applicable state or federal law.

Signature: _____ Date: _____