



41775 Production Drive • Harrison Twp., MI 48045 • Phone: 586.468.7571 • Fax: 586.463-1191 • ElectrexIndustrial.com

EMPLOYMENT APPLICATION FORM

Personal

Last Name: First: Middle: Date:

Street Address: Social Security No.:

City: State: Zip: Are you 18 years or older?
 Yes No

Email: Phone: Cell:

Desired Employment

Position: Date you can start: Salary Desired:

Are you employed now? Yes No If so may we inquire of your employer? Yes No

Ever applied to this company before? Yes No Where? When?

Ever worked for this company before? Yes No Where? When?

Reason for leaving:

Name of last supervisor at this company:

Who referred you to this company?
 Employment Agency Newspaper Advertising Friend
 State Employment Office College Placement Service Walk-In Other

Continued on the next page

Education

School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
Graduate				<input type="radio"/> Yes <input type="radio"/> No	
College				<input type="radio"/> Yes <input type="radio"/> No	
Business/Trade/Technical				<input type="radio"/> Yes <input type="radio"/> No	
High School				<input type="radio"/> Yes <input type="radio"/> No	
Elementary				<input type="radio"/> Yes <input type="radio"/> No	

Additional Information

Have you been convicted of any crimes in the past ten years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court?

Yes
 No
 If "Yes" describe in full:

Other special training or skills (languages, machine operation, etc.):

Membership in professional and civic organizations, special accomplishments, awards, etc. (Exclude those which may disclose your race, color, religion, age or national origin.):

Continued on the next page

Previous Employers

Name of Employer:

Name of last supervisor:

Dates of Employment:

From: To: Starting Salary: Final Salary:

Complete Address:

Phone Number:

Reason for Leaving (be specific):

State Job Title and Describe Your Work:

May we contact your employer? Yes No

Name of Employer:

Name of last supervisor:

Dates of Employment:

From: To: Starting Salary: Final Salary:

Complete Address:

Phone Number:

Reason for Leaving (be specific):

State Job Title and Describe Your Work:

May we contact your employer? Yes No

Name of Employer:

Name of last supervisor:

Dates of Employment:

From: To: Starting Salary: Final Salary:

Complete Address:

Phone Number:

Reason for Leaving (be specific):

State Job Title and Describe Your Work:

May we contact your employer? Yes No

Continued on the next page

References

	Name	Address	Business	Years Acquainted
1				
2				
3				

Additional Information

Have you served in the U.S. Armed Forces?

Yes No If "Yes" in what branch?

Describe the training you received that is relevant to the position for which you are applying:

Authorization

"I certify that the facts contained in this application are true complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of the time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative."

I fully understand and accept all terms and conditions in the above statement.

Date:

Signature:

Do Not Write On This Page. For Interviewer's Use Only.

Interviewed By:

Date:

Comments:

Interviewed By:

Date:

Comments:

Interviewed By:

Date:

Comments:

Hired (Date) for Dept.:

For Position:

Salary Wages:

Will Report:

Approved 1

Employment Manager:

Date:

Approved 2

Employment Manager:

Date:

Approved 3

Employment Manager:

Date: