

Employment Application

We are an Equal Opportunity Employer

Date:

Applicant Information			
Please print in ink. You must complete entire applic	cation.		
Name:			
Last	First	Mi	ldle
Address:			
Street	City	State	Zip
Phone:	Email Address	s:	
Home	Cell		
Are there other names under which you have w	orked or attended school? If yes, please	list for reference checki	ng 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 verif		num age requirements fo	or the type of work for which
you are applying, and have obtained a work per	•	num age requirements re	i the type of work for which
Are you legally authorized to work in the Unite	ed States? Yes	No	
(If hired, you will be required to provide proof	of work authorization.)		
Have you ever been convicted of a crime (inclution minor traffic violations?	ding all misdemeanors and felonies) or J	pleaded no contest for a	y offense or violation other
Yes No If yes, explain 1) n	ature of crime, 2) date of conviction, an	d 3) state in which conv	ricted, for each crime.
			_
Convictions are not an automatic bar to emplo	Numant .		
-			
Do you have any pending criminal charges aga	inst you? Yes	No	
If yes, explain the 1) nature of charges, 2) date	e issued, and 3) county and state where i	issued, for all pending cl	narges.
Referral Source			
Please check the appropriate category of the so		Other	
Internet WI Job Center	Newspaper Beloit Daily News	Other School: (Name)	
WI Tech Connect	Walworth County Careers	Radio Radio	
Indeed	Rockford Register	Kaulo	
MicroPrecision Website	Freeport News	Employee Referral	(Name):
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	-		

Position Applying For						
Position Title:	Date Avai	Date Available For Work: Sal		Salary	ry/Wage Preference:	
Shift: (check any available to work) 1st 2nd 3rd	Will you travel	if the job requires it?				
Education						
School (Name and Location, City, State)	Years Completed	Major / Minor / Course of Study		se of Study	Diploma or Degree Rec'd	
High School						
College						
Graduate						
Other (Specify)						
Гraining						
List any relevant training programs completed.						
Course / Seminar	Organizatio	on		Subject		Date(s) Attended
Skills & Qualifications Summarize any special training, skills, licenses applying, including computer skills, software pr		hat may assist you	in perfo	rming the posit	ion for	which you are

Equipment & Skills

Please indicate what equipment / machines that you have operated and / or have setup experience as well as measuring equipment.

Not Applicable	Operate Only	Setup & Operate		
			Manual Mills / Lathes	
			CNC Milling / Machining Centers	
			CNC Lathes / Turning Centers	
			Brown & Sharpe / Traub / Cam Style Screw Machines	
			Multiple Spindle Screw Machines	
			Swiss Torno Screw Machines	
			Fanuc Controls	
No Experience	Familiar	Proficient		
			Blue Print Reading (including GD&T)	
			Micrometers	
			Calipers	
			Hand-Held Pin & Ring Gages	
			Thread Gages	
			Optical Comparator	
			Height Gages	
			Drop Indicators	
			Profilometers	
Other equipment	used:			
No Experience	Little Experience	3+ Years Experience		
	П	\[\square \]	Steel	
\Box	\Box	П	Stainless Steel	
	Ī	\Box	Aluminum	
			Brass	
			Copper	
			Bronze	
			Plastic	
With what range	of tolerances have	you worked?		
Please list the make/model of machines with which you have worked. For example, Mori Seiki, Myanos, Tsugami, etc.				
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Employment History

What did you enjoy most about your position?

What did you like least about the position?

Starting with your most recent employer, provide the following information. "See Resume" is not acceptable. List positions held for the past ten years. Use additional paper if necessary. Name of Employer Telephone Address Dates Employed Job Title Starting Compensation Immediate Supervisor Final Compensation Description of Duties Reason for Leaving What did you enjoy most about your position? What did you like least about the position? Name of Employer Telephone Address Dates Employed Job Title Starting Compensation Final Compensation Immediate Supervisor Description of Duties Reason for Leaving What did you enjoy most about your position? What did you like least about the position? Name of Employer Telephone Address Dates Employed Job Title Starting Compensation Final Compensation Immediate Supervisor Description of Duties Reason for Leaving

Employment History <i>continued</i>						
Name of Employer	Telephone					
Address	Dates Employed					
Job Title	Starting Compensation \$					
Immediate Supervisor	Final Compensation					
Description of Duties	\$					
Reason for Leaving						
What did you enjoy most about your position?						
What did you like least about the position?						
The state of the s						
Name of Employer	Telephone					
Address	Dates Employed					
Job Title	Starting Compensation					
Immediate Supervisor	\$ Final Compensation					
Description of Duties	\$					
Reason for Leaving						
What did you enjoy most about your position?						
What did you like least about the position?						
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 of the information that 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 understand a background check will be completed. 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 an/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 or my background.

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 complete a new application.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.					
	<u> </u>				
Signed by Applicant	Date				

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 an 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 re	lease and discharge, abso	olve, indemnify and hold harmle	ess such former employer, person,
firm, corporation, school or government	nent 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 know	wn or unknown, anticipated or
unanticipated, arising from or indica	nt to the disclosure or re	lease except for the malicious a	nd willful disclosure of derogatory
facts concerning my employment ma	ade for the express purpo	ose of preventing me from obtain	ning employment which the
officer, employee or agent disclosing	g such facts knows are u	ntrue.	
Applicant Signature	Date	Witness Signature	Date