

**DIE-MENSION CORPORATION
 3020 NATIONWIDE PKWY
 BRUNSWICK, OHIO 44212
 330-273-5872
 APPLICATION FOR EMPLOYMENT**

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Position Applied For:	Date of Application
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How Did You Learn About Us?
 Advertisement Inquiry Other _____
 Friend

Last Name	First Name	Middle Name
Address	City	State Zip
Telephone #		

Best time to contact you at home is:....._____AM/PM

If you are under 18 years of age, can you provide required proof of you eligibility to work? ___Yes ___No

Have you ever filed an application with us before?.....___Yes ___No
 If Yes, give date: _____

Have you ever been employed with us before?.....___Yes ___No
 If Yes, give date: _____

Do any of your friends or relatives, other than spouse, work here?.....___Yes ___No

Are you currently employed?.....___Yes ___No

May we contact your present employer?.....___Yes ___No

Are you prevented from lawfully becoming employed in the country because
 of Visa or Immigration Status
Proof of citizenship or immigration status will be required upon employment.....___Yes ___No

Date available for work ___/___/___ What is your desired salary range? _____

Are you available to work: Full-Time___ Part-Time___ Temporary___

Are you currently on "lay-off" status and subject to recall?.....___Yes ___No

Can you travel if a job requires it?.....___Yes ___No

Education

	Name & Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States Military.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.

Employer		Dates Employed		Worked Performed
		From	To	
Address				
Job Title	Supervisor	Hourly Rate / Salary		
Reason for leaving		Start	Final	

2.

Employer		Dates Employed		Worked Performed
		From	To	
Address				
Job Title	Supervisor	Hourly Rate / Salary		
Reason for leaving		Start	Final	

3.

Employer		Dates Employed		Worked Performed
		From	To	
Address				
Job Title	Supervisor	Hourly Rate / Salary		
Reason for leaving		Start	Final	

4.

Employer		Dates Employed		Worked Performed
		From	To	
Address				
Job Title	Supervisor	Hourly Rate / Salary		
Reason for leaving		Start	Final	

Additional Information

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. Yes No

References

1. (Name) _____ Phone: () _____

2. (Name) _____ Phone: () _____

3. (Name) _____ Phone: () _____

Applicant's Statement

I certify that answers given herein are true and complete.

I authorize investigation 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 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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.

Signature of Applicant

Date

FOR HUMAN RESOURCE DEPARTMENT USE ONLY

Arrange Interview? ____ Yes ____ No

Remarks _____

Interviewer

Date

Employed ____ Yes ____ No

Date of Employment _____

Job Title _____ Hourly Rate / Salary _____

By _____
Name and Title _____ Date _____