

Application For Employment



6267 St. Clair Hwy
China Twp. MI 48054
Phone (810) 329-4027
Fax (810) 329-6359

To the Applicant. We appreciate your interest in our Firm and assure you that we are interested in your qualifications. A clear understanding of your background and work history will aid us in seeking to place you in a position which, in our judgment, best meets your qualifications.

T.R. Pieprzak Company, Inc. is an Equal Opportunity Employer, and will not unlawfully discriminate on the basis of race, color, sex, religion, national origin, age, marital or veteran status, the presence of a medical condition or handicap, height, weight or any other protected status.

Personal Information:

Name _____ Date of Application _____
(Last) (First) (Middle)

Address _____
(Street) (City) (State) (Zip)

Telephone Number _____ Cell Phone Number _____

Social Security Number _____

Are you 18 years or older? Yes No Are you a U.S. Citizen? Yes No

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

Have you been previously employed here? Yes No If yes, date(s) _____

Have you filed an application here before? Yes No If yes, date(s) _____

Are any of your relative's current or former employees of this company? Yes No

Are you employed now? Yes No If so, may we contact your present employer? Yes No

Are you on lay-off and subject to recall? Yes No Are you able to travel is job requires? Yes No

Employment Desired:

Position(s) applied for _____

Kind of work sought: Full Time Part Time Other _____

Do you have any special training, skills, qualification or other experiences that relate to the position(s) applied for?

Salary desired _____ Date available to work _____

Employment Experience (List current or most recent job first)

1	Employer	Date		Work Performed
	Address	From	To	
	City State Zip			
	Phone Number	Hourly Rate/Salary		
	Job Title	Starting	Final	
	Supervisor			
	Reason For Leaving			

2	Employer	Date		Work Performed
	Address	From	To	
	City State Zip			
	Phone Number	Hourly Rate/Salary		
	Job Title	Starting	Final	
	Supervisor			
	Reason For Leaving			

3	Employer	Date		Work Performed
	Address	From	To	
	City State Zip			
	Phone Number	Hourly Rate/Salary		
	Job Title	Starting	Final	
	Supervisor			
	Reason For Leaving			

May we contact the employers listed above? Yes No

If not, please indicate which one(s) you do not wish us to contact _____

Education	Name/Location	Years Completed	Diploma/Degree	Courses of Study
Elementary				
High School				
College				
Graduate				
Vocational/Training				

References (Do not include relatives or former employers)

	Name	Address	Phone Number	Years Acquainted
1				
2				
3				

Military Service Record

Have you had any experience in the Armed Forces of the United States or in a State National Guard? Yes No

If yes, what branch? _____ Rank at Discharge _____ Date of Discharge _____

Are you in the reserves? Yes No If yes, date obligation ends _____

Special/Technical training _____

Additional Information

Have you been convicted of a crime? Yes No If so, where, when and nature of offense _____

Do you have a valid driver's license? Yes No License No. _____ State _____

List all accidents in which you have been involved in during the past 5 years _____

List all tickets (excluding parking tickets) received during the past 5 years _____

Have you ever been refused automobile insurance? Yes No

Do you currently own or lease an automobile? Yes No

Would you be willing to take a drug test? Yes No

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

In case of an emergency, we should notify _____
(Name)

(Address)

(Phone Number)

How did you hear about us? _____

I certify that information given herein is true and complete to the best of my knowledge. I understand that T.R. Pieprzak Company, Inc. may investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools and employers named therein, except as specifically limited on this application, to provide information requested about me, and I release them from liability for damages in providing this information. I understand and acknowledge that any misrepresentation, omission, or incorrect statement of fact can result in immediate discharge.

I understand and acknowledge that, if employed, my employment and compensation will be at the will of T.R. Pieprzak Company, Inc. and can be terminated, with or without cause, and with or without notice, at any time at the option of T.R. Pieprzak Company, Inc. (unless a collective bargaining agreement at T.R. Pieprzak Company, Inc., gives me other rights.) I further understand and agree that no company manager, company representative, agent or employee of T.R. Pieprzak Company, Inc. other than its President or Vice President, has now or has had in the past any authority to enter into any agreement for employment for any specified period of time or to make any agreement which is contrary to or a modification of the above described employment relationship and that any such agreement or representation must be in writing and signed by both myself and the President or Vice President of T.R. Pieprzak Company, Inc. in order to be effective. Nor can any policies or practices of T.R. Pieprzak Company, Inc. modify the above.

Furthermore, if I become employed by T.R. Pieprzak Company, Inc. then I agree that in consideration of my employment I will not commence any action, administrative claim or suite more than six (6) months after the date of my employment is terminated, regardless of the circumstances of the termination, which relates to my employment and/or termination of my employment and which would otherwise be timely, and I hereby waive any statute of limitation to the contrary (unless a collective bargaining agreement in effect at T.R. Pieprzak Company, Inc. requires that I initiate such an action or claim or suite in less than six (6) months in which case such lesser period shall apply.)

Applicant's Signature

Date

T.R. Pieprzak Company, Inc. is an Equal Opportunity Employer.

This application will only be considered for the ninety calendar day period after its receipt by T.R. Pieprzak Company, Inc. Should you wish to be considered after the expiration of this period, you must reapply.

T.R. Pieprzak Company, Inc. is an equal opportunity employer and complies with all laws prohibiting discrimination on the basis of race, color, age, sex, national origin, religion, citizenship, handicap, height, weight, and marital status. Under the Michigan Handicapper Civil Rights Act and the Federal American with Disabilities Act, an

employer has a legal obligation to accommodate an employee's or job applicant's handicap unless the accommodations would impose an undue hardship on the employer. A handicapper may allege a violation against an employer regarding a failure to accommodate his or her handicap under Michigan Law only if the handicapper notified the employer in writing of the need for accommodation within 182 days after the date the handicapper knew or reasonable should be known that an accommodation was needed.

Interview Use Only (Do not write below this line)

Interviewed by _____ Date _____

Remarks:

Referred by _____

Hired _____ Position _____ Will Report _____ Wages/Salary _____

Approved _____