

# EMPLOYMENT APPLICATION

## An Equal Opportunity Employer

SMI & Hydraulics, Inc. is an Equal Opportunity Employer. SMI & Hydraulics, Inc. does not discriminate on the basis of race, religion, color, sex, age, national origin, or disability, or on any basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

*Please print and fill out all sections*

## Applicant Information

Applicant Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Other Phone: \_\_\_\_\_

Current Address: Number and Street \_\_\_\_\_

City \_\_\_\_\_ State & Zip \_\_\_\_\_

How were you referred to SMI & Hydraulics, Inc.? \_\_\_\_\_

## Employment Positions

Position(s) applying for: \_\_\_\_\_

## Are you applying for:

- Temporary work – such as summer or holiday work?      Yes      No
- Regular part-time work?      Yes      No
- Regular full-time work?      Yes      No

What days and hours are you available for work? \_\_\_\_\_

If applying for temporary work, when will you be available? \_\_\_\_\_

If hired, on what date can you start working? \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Can you work on the weekends?      Yes      No

Can you work evenings?      Yes      No

Are you available to work overtime?      Yes      No

Salary desired: \$ \_\_\_\_\_

**Personal Information**

If hired, would you have transportation to/from work?      Yes      No

Are you over the age of 18? (If under 18, hire is subject to verification of minimum legal age.)      Yes  
No

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States?      Yes      No

If hired, are you willing to submit to and pass a controlled substance test?      Yes      No

Are you able to perform the essential functions of the job for which you are applying, either with / without reasonable accommodation?      Yes      No

If no, describe the functions that cannot be performed: \_\_\_\_\_

\_\_\_\_\_  
*(Note: SMI & Hydraulics, Inc. complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)*

Have you ever been convicted of a criminal offense (felony or misdemeanor)?      Yes      No

If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the case.

\_\_\_\_\_  
\_\_\_\_\_

*(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)*

**Education, Training and Experience**

**High School**

School Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_ Did you graduate?      Yes      No

Degree / diploma earned: \_\_\_\_\_

**College / University**

School Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_ Did you graduate?      Yes      No

Degree / diploma earned: \_\_\_\_\_

**Vocational School**

School Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_ Did you graduate? Yes No

Degree / diploma earned: \_\_\_\_\_

**Military**

Branch: \_\_\_\_\_ Rank in Military: \_\_\_\_\_

Total Years of Service: \_\_\_\_\_ Skills/duties: \_\_\_\_\_

Related details: \_\_\_\_\_

**Additional Information**

Do you have any other experience, training, qualifications, or skills which you feel should be brought to our attention, in the case that they make you especially suited for working with us?

Yes No

If yes, please explain: \_\_\_\_\_

**Employment History**

Are you currently employed? Yes No

If you are currently employed, may we contact your current employer? Yes No

Below, please describe past and present employment positions, dating back five (5) years. Please account for all periods of unemployment. **Even if you have attached a resume, this section must be completed.**

Name of Employer: \_\_\_\_\_ Business Type: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for references? Yes No

Name of Employer: \_\_\_\_\_ Business Type: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for references?      Yes      No

Name of Employer: \_\_\_\_\_ Business Type: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position & Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for references?      Yes      No

**(Attach sheet if more space is needed)**

**References**

List below three (3) persons who have knowledge of your work performance within the last five (5) years. Please include professional references only.

Name - First, Last: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_

Number of Years Acquainted: \_\_\_\_\_

Name - First, Last: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_

Number of Years Acquainted: \_\_\_\_\_

Name - First, Last: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_

Number of Years Acquainted: \_\_\_\_\_

**Please Read and Initial Each Paragraph, then Sign Below**

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure employment can be grounds for rejection of application or, if I am employed by SMI & Hydraulics, Inc., terms for my immediate expulsion from SMI & Hydraulics, Inc.

\_\_\_\_\_

I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without prior notice, and by either me or SMI & Hydraulics, Inc.

\_\_\_\_\_

I permit SMI & Hydraulics, Inc. to examine my references, record of employment, education record, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release SMI & Hydraulics, Inc., my former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such examination or revelation.

\_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_