



## APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without regard to race, color, religion, sex, national origin, age, marital or veteran status, handicap, or any other legally protected status.

<b>PERSONAL DATA</b>	Last Name			First Name			Middle			Date					
	Street Address						Home Phone								
	City, State, Zip						Business Phone								
	Are you a U.S. citizen?      Yes                  No						Social Security #								
	If no, list your visa and alien registration no.:														
	Check type of employment desired						Date available to begin work								
	<div style="display: flex; justify-content: space-around;"> <span>Full-Time</span> <span>Part-Time</span> <span>Temporary</span> </div>														
	Position Desired						Pay Expected								
	Have you ever worked for Fallsway Equipment before?						Will you work overtime if asked?								
						<div style="display: flex; justify-content: space-around;"> <span>Yes</span> <span>No</span> </div>									
Driver's License Number and State Issued						Are you between the ages of 18 and 70?									
						<div style="display: flex; justify-content: space-around;"> <span>Yes</span> <span>No</span> </div>									
<b>Check Source of Referral</b>															
Employment Office				Sign on Service Van				Newspaper				Friend			
State Employment Office				Walk-In				Internet				Other			
<b>EDUCATION</b>	<b>SCHOOL</b>		<b>NAME/LOCATION OF SCHOOL</b>				<b>COURSE OF STUDY</b>				<b>YEARS COMPLETED</b>		<b>DID YOU GRADUATE</b>		
	High School												Yes No		
	College												Yes No		
	Business/Tech Trade												Yes No		
<b>MILITARY</b>	Did you serve in the Armed Forces?				If yes, date of separation				If yes, what Branch?						
	<div style="display: flex; justify-content: space-around;"> <span>Yes</span> <span>No</span> </div>														
Describe any training relevant to the position for which you are applying.															

Please give accurate, complete full-time and part-time employment records. Start with your most recent employer.

<b>EMPLOYMENT</b>			
<b>EMPLOYER 1</b>	Company Name		Telephone
	Address		Employed From                      To
	Name of Supervisor		Weekly Pay Starting
	State Job Title and describe your work		Ending Reason for leaving
<b>EMPLOYER 2</b>	Company Name		Telephone
	Address		Employed From                      To
	Name of Supervisor		Weekly Pay Starting
	State Job Title and describe your work		Ending Reason for leaving
<b>EMPLOYER 3</b>	Company Name		Telephone
	Address		Employed From                      To
	Name of Supervisor		Weekly Pay Starting
	State Job Title and describe your work		Ending Reason for leaving
<b>EMPLOYER 4</b>	Company Name		Telephone
	Address		Employed From                      To
	Name of Supervisor		Weekly Pay Starting
	State Job Title and describe your work		Ending Reason for leaving

List at least one personal reference from each company listed in the employment section. This individual should be someone other than your supervisor.

Employer	Reference Name	Phone No.	Job Title
1			
2			
3			
4			

May we contact these employers?      Yes      No      Yes, except for present employer

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court?      Yes              No              If, yes describe in full

State names of relatives and friends working for us, other than your spouse, if applicable.

List some of your hobbies and interests

Describe your personal goals and expectations of employment at Fallsway:

In case of an emergency, please contact:

Phone:

### ATTENDANCE AND PUNCTUALITY INFORMATION

Consistent attendance and punctuality are essential requirements of every job with Fallsway Equipment Co. Inc. Is there anything which would interfere with your regular attendance and punctuality if you are offered a job here?      Yes              No

If, yes explain:

### SKILLS, SPECIAL TRAINING AND CERTIFICATIONS

Please list any skills, special training or equipment that you can operate, e.g., personal computer, Lathe, Hydraulic specialist, etc.

### NOTIFICATION AND AGREEMENT

I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE, AND COMPLETE. I UNDERSTAND THAT THE FALSIFICATION, MISREPRESENTATION OR OMISSION OF FACT ON THIS APPLICATION WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN OR HOW DISCOVERED.

Questions regarding this statement should be directed to any employment interviewer before signing. The application will be given every consideration, but the receipt does not imply that the applicant will be employed. Applications will remain active for 60 days.

I authorize the investigation of all statements and information contained within this application. I release from all liability anyone supplying such information and I also release the employer from all liability that might result from making an investigation.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.

APPLICANT SIGNATURE

DATE