

MACHINE SPECIALTY &	MANUFACTURING IN	C.
Position applying for: _		

Machine Specialty & Manufacturing, Inc. is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

Last First Middle Telephone: Email:	2 7	EMPLO	YEE INFORM	MATION		
Name: Last First Middle Telephone: Email:	DATE					
Last First Middle Telephone: Email:	DATE:					
Telephone:Email:	Name:					
Address: Referred by: Are you able to perform the essential functions of the position with or without accommodations? Work Overtime? Yes No I am legally eligible for employment in the U.S.? If so, fill out the following: Issuing State: Yes No Are you employed now? Yes No I sway we contact your present employer? I will be able to report to work days after Are you seeking a permanent position? Yes No Being notified I am hired. Do you have reliable transportation? Yes No EDUCATION High School Graduate or General Education (GED) Test Passed? Yes No If no, list the highest grade comple University Business/Technical Additional SKILLS & QUALIFICATIONS Other qualifications such as special skills, abilities or honors that should be considered: Types of computers, software, and other equipment you are qualified to operate or repair: Professional licenses, certifications or registrations: Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to the provided with the position of the provided provided in the provided pr	Last	First		Middle		
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EMPLOYMENT HISTORY

Please list your work experience for the past 10 years beginning with your most recent job held. If you were self-employed, give firm name. Attached additional sheets if necessary.

Employer Name and	Position title/duties, skills:		Start Date:	End Date:
Address				
			Reason for leavin	ng:
Pay: \$				
Per:	Supervisor:	Telephone:		
Employer Name and Address	Position Title/duties, skills:		Start Date:	End Date:
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Employer Name and	Position title/duties, skills:		Start Date:	End Date:
Address				
			Reason for leavin	ng:
Pay: \$				
Per:	Supervisor:	Telephone:		

REFERENCES						
Please list two personal references other than relatives or previous employers.						
Name	Address	Telephone	Occupation	Years Known		
Name	Address	Telephone	Occupation	Years Known		

INFORMATION TO THE APPLICANT

PLEASE READ CAREFULLY BEFORE SIGNING:

Machine Specialty & Manufacturing, Inc. is an equal opportunity employer. Machine Specialty & Manufacturing, Inc. does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Machine Specialty & Manufacturing, Inc. to hire me. If I am hired, I understand that either Machine Specialty & Manufacturing, Inc. or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Machine Specialty & Manufacturing, Inc. has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Machine Specialty & Manufacturing, Inc. true and complete information on this application. No requested information has knowingly been concealed. I authorize Machine Specialty & Manufacturing, Inc. to investigate all statements contained herein and the references and employers listed above to give any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release Machine Specialty & Manufacturing, Inc. from all liability for any damage that may result from utilization of such information. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature of Applicant

Date

EQUAL OPPORTUNITY EMPLOYER

