

APPLICATION FOR EMPLOYMENT HAYES MANUFACTURING

PLEASE PRINT CLEARLY AND ANSWER ALL QUESTIONS
RESUMES ARE NOT A SUBSTITUTE FOR A COMPLETED APPLICATION

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, religion, gender, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

This company is an at-will employer. This means that regardless of any provision in this application, if hired, the company or employee may terminate the employment relationship at any time, for any reason, with or without cause or notice. This application will remain on file for a period of 1 year. Applicants must renew their application after this time period to be considered for other job openings.

Today's Date: _____ Position Applied For: _____

Name: _____
Last First MI

Current Address: _____
Street
City State Zip

Prior Address: _____
Street
City State Zip

Phone: _____ Alt Phone: _____

E-mail Address: _____

If Under the Age of 18, Can You Produce the Necessary Work Certificate At the Time of Employment?

Yes _____ No _____

Type of Employment Desired: Full-time _____ Part-time _____

If Part-time, State Hours Available to Work _____

Are You Willing to Work Overtime? Yes _____ No _____

Have You Ever Been Employed by This Company? Yes _____ No _____ If Yes, Provide Dates of Employment, Location and Reason for Separation From Employment

How did you hear about us? Walk in _____ Advertisement _____ Referral _____ Other _____

Are you currently employed? Yes _____ No _____

Have you ever been convicted of a felony?

Yes _____ No _____ If so, please provide the place and date of the conviction.

Note: Answering yes to this question will not automatically disqualify you from employment.

EMPLOYMENT HISTORY

Please list the names of your present and/or previous employers in chronological order with present or last employer listed first. Account for all periods of time including any period of unemployment. If self-employed, supply firm name and business references. Incomplete information could disqualify you from further consideration.

Current or Most Recent Employer:				
Employed From:	Employed To:	Starting Salary: <small>Hourly Annually</small>	Ending Salary: <small>Hourly Annually</small>	
Company Name:			May We Contact?	
Address:				
City:	State:	Zip:	Phone Number:	
Position /Title:				
Supervisor:			Supervisor's Title:	
Nature of Work Performed & Position Responsibilities				
Reason for Leaving:				
Second Most Recent Employer:				
Employed From:	Employed To:	Starting Salary: <small>Hourly Annually</small>	Ending Salary: <small>Hourly Annually</small>	
Company Name:			May We Contact?	
Address:				
City:	State:	Zip:	Phone Number:	
Position /Title:				
Supervisor:			Supervisor's Title:	
Nature of Work Performed & Position Responsibilities				
Reason for Leaving:				
Third Most Recent Employer:				
Employed From:	Employed To:	Starting Salary: <small>Hourly Annually</small>	Ending Salary: <small>Hourly Annually</small>	
Company Name:			May We Contact?	
Address:				
City:	State:	Zip:	Phone Number:	
Position /Title:				
Supervisor:			Supervisor's Title:	
Nature of Work Performed & Position Responsibilities				
Reason for Leaving:				
Fourth Most Recent Employer:				
Employed From:	Employed To:	Starting Salary: <small>Hourly Annually</small>	Ending Salary: <small>Hourly Annually</small>	
Company Name:			May We Contact?	
Address:				
City:	State:	Zip:	Phone Number:	
Position /Title:				
Supervisor:			Supervisor's Title:	
Nature of Work Performed & Position Responsibilities				
Reason for Leaving:				

EDUCATION

	Name of School	City/State	No. of Years Attended	Subjects/Major	Degree Y/N
High School					
College or University					
Graduate School					
Trade or Business School					

Licenses or Certifications:

Name/Type:	Issued By:	Issue Date:	Expiration Date:
Name/Type:	Issued By:	Issue Date:	Expiration Date:
Name/Type:	Issued By:	Issue Date:	Expiration Date:

Special skills, experience and/or training that would enhance your ability to perform the position applied for:

Equipment and/or Computer Skills:

Please explain fully all gaps in your employment history.

Have you served in the United States Armed Forces? Yes _____ No _____

If so, list branch and dates of service, as well as the type of discharge you received:

Have you ever been terminated or asked to resign from any job? Yes _____ No _____ If Yes, how many times? _____

Has your employment ever been terminated by mutual agreement? Yes _____ No _____

If Yes, how many times? _____

Have you ever been given the choice to resign rather than be terminated? Yes _____ No _____

If Yes, how many times? _____

If you answered Yes to any of the above three questions, please explain the circumstances of each occasion.

WORK REFERENCES

Name	Company	Work Relationship (i.e. supervisor, co-worker)	Phone #	Fax #

PERSONAL REFERENCES

Name	Address	Relationship	Phone #	No. of Years Known

Attach any reference letters you may want to share with us.

Acknowledgement

It is the policy of Hayes Manufacturing to provide equal employment opportunity to all qualified persons without regard to veteran status, uniformed service member status, race, religion, gender, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws. Only applicants meeting the minimum requirements for a position as determined by the company will be considered for employment. Should more than one qualified person make application, the company reserves the right to select the applicant that, in its opinion, possesses the best qualifications.

Authorization

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside.

I understand that Hayes Manufacturing may now have, or may establish, a drug-free workplace and/or alcohol testing program consistent with applicable federal, state, and local law. If Hayes Manufacturing has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with federal, state, and local law. I also understand that all employees of Hayes Manufacturing may be subject to urinalysis and/or blood screening and/or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing.

If employed by Hayes Manufacturing, I understand and agree that Hayes Manufacturing, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of all property on its premises (including, but not limited to, files, lockers, desks, vehicles, and computers).

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement, as well as an agreement to arbitrate.

I certify that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

This company is an at-will employer. This means that regardless of any provision in this application, if hired, the company or I may terminate the employment relationship at any time, for any reason, with or without cause or notice. Nothing in this application or in any document or statement, written or oral, shall limit the right to terminate employment at will. I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for the company to hire me. I understand that if employment is offered to me, either verbally or in writing, such offer does not constitute a contract of employment. I understand that if I am employed by the company my employment will be for no definite period of time and that my employment can be terminated at any time and for any reason, with or without cause and without prior notice, at the option of either the company or myself. I also understand that this status can only be altered by a written contract of employment, specific to all material terms, that is signed by an authorized officer of the company.

If hired, I agree to conform to the rules and regulations of the company and I understand that the company has complete discretion to modify such rules and regulations at any time, except that it will not modify its policy of employment at-will.

I authorize Hayes Manufacturing or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States.

I certify that all of the information that I have provided on this application is true, accurate and complete.

Date _____

Applicant Signature _____