

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

Federal and State law prohibits discrimination because of race, color, religion, age, sex, national origin, veteran status, physical, or mental handicaps.

No question on this application is intended to secure information to be used for such discrimination.

Today's Date						
PERSONAL DATA						
Social Security No		Email Address				
NameLast		First	Middle			
		First				
AddressStreet		Telephone City, State, ZIP				
		•				
Age: () Over 18 Are you authorized to wo			birthdate			
Are you authorized to we	ork in the U.S.: () 1	es () No				
	I	DESIRED EMPLOYMEN	T			
		Full Time Part	Time Date available fo	or work		
Salary requirement		Shift Preference () 1 st ($) 2^{nd} () 3^{rd} () Any$			
		EDUCATION				
		EDUCATION CIRCLE LAST YEAR		MAJOR COURSE OF		
TYPE OF SCHOOL	NAME/LOCATION	COMPLETED	DIPLOMA/DEGREE	STUDY		
HIGH SCHOOL		1 2 3 4	() YES () NO () GED () HSE			
COLLEGE		1 2 3 4	() YES () NO			
PROFESSIONAL/ TECHNICAL SCHOOL		1 2 3 4	() YES () NO			
Please state any additional information you feel may be helpful to us in considering your application.						
U.S. Military Service: () Yes () No Branch of Service From To						
Personal References (may include friends or relatives):						
NAME		ADDRESS				
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Have you ever been convicted of a felony? () Yes () No

DATE OF CONVICTION	PLACE OF CONVICTION		OFFENSE	
RECORD OF PREVIO	US EMPLOYMENT			
Present or most recent employer:		Dates:	Job title:	
Name		From:	Description:	
Address				
City & State		То:		
Company Reference				
Position of Reference		Data of Days		
Phone Number of Reference		Rate of Pay:		
Reason for leaving				
May we contact your present	t employer?			
Next Previous Employer:		Dates:	Job title:	
Name	I	From:	Description:	
Address		.		
City & State		To:		
Company Reference				
Position of Reference	I	Rate of Pay:		
Phone Number of Reference				
Reason for leaving				
Next Previous Employer:		Dates:	Job title:	
Name		From:	Description:	
Address				
City & State		To:		
Company Reference				
Position of Reference		Rate of Pay:		
Phone Number of Reference				
Reason for leaving				
Next Previous Employer:		Dates:	Job title:	
Name		From:	Description:	
Address				
City & State		To:		
Company Reference	· ·			
Position of Reference		Rate of Pay:		
Phone Number of Reference				
Reason for leaving				
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In signing this Application for Employment, it is done with the understanding that my previous employers will be asked for information relative to my employment record with them. I hereby release from all liability or damage those individuals or corporations who provide information relating to my prior employment or character.

I understand and agree that employment with Auburn Manufacturing is at will and that either the Company or I can terminate my employment and compensation, with or without cause, and with or without notice, at any time.

I consent to all medical examinations and drug testing required by Auburn Manufacturing.

The information on this entire application is accurate and subject to check by Auburn Manufacturing. I understand that any misleading or any incorrect statements may render this application void and would be cause for immediate dismissal in the event of employment.

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