



ERMCO EMPLOYMENT APPLICATION

P DATE: _____ POSITION APPLIED FOR: _____

E NAME: _____ SOC. SEC. NO. _____
Last Middle First

R PHONE NUMBER _____

S PRESENT ADDRESS: _____ HOW LONG? _____
Street City State Zip

O PREVIOUS ADDRESS: _____ HOW LONG? _____
Street City State Zip

N ARE YOU 18 YEARS OF AGE OR OLDER _____ (Hire is Subject to Verification that you are of Minimum Legal)

A DO YOU HAVE ANY OF THE FOLLOWING RELATIVES WORKING FOR THIS COMPANY:
L MOTHER _____ FATHER _____
CHILD _____ SPOUSE _____
GRANDPARENTS _____ GRANDCHILDREN _____

HAVE YOU BEEN CONVICTED OF A SERIOUS CRIME /FELONY IN THE PAST SEVEN YEARS?
Yes _____ NO _____
(Conviction of a crime is not an automatic bar to employment. All circumstances will be considered, including the nature and seriousness of the crime, and all rehabilitation efforts of the applicant.)

AVAILABILITY: FULL TIME _____ PART TIME _____ TEMPORARY _____

SHIFT: ANY _____ DAYS _____ EVENINGS _____ MIDNIGHTS _____

ARE YOU WILLING TO WORK OVERTIME? _____

E CIRCLE LAST GRADE COMPLETED 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16
D DID YOU GRADUATE FROM HIGH SCHOOL ?

U
C
A
T
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O
N

Name of School	Nature of Course	Graduate	Degree
High School			
Business			
Apprentice or Trade			
College			
Other			

DO YOU HAVE ANY PLANS FOR FURTHER EDUCATION? _____

M Were you in the U.S. Armed Forces? _____
I If yes, what branch? _____
L Dates of duty: From _____ To _____ Rank at discharge? _____
I List duties in the service:
T _____
A _____
R _____
Y _____

WORK EXPERIENCE (ATTACH RESUME IF AVAILABLE)

1.

Name of Present or Last Employer		Address		Phone
Beginning Date	Ending Date	Ending Pay	Reason for leaving	
Position Held	Name of Supervisor		Supervisor's job title	

Description of Duties, Accomplishments, etc.

What did you like best about this job?

What did you like least about this job?

2.

Name of Present or Last Employer		Address		Phone
Beginning Date	Ending Date	Ending Pay	Reason for leaving	
Position Held	Name of Supervisor		Supervisor's job title	

Description of Duties, Accomplishments, etc.

What did you like best about this job?

What did you like least about this job?

3.

Name of Present or Last Employer		Address		Phone
Beginning Date	Ending Date	Ending Pay	Reason for leaving	
Position Held	Name of Supervisor		Supervisor's job title	

Description of Duties, Accomplishments, etc.

What did you like best about this job?

What did you like least about this job?

4.

Name of Present or Last Employer		Address		Phone
Beginning Date	Ending Date	Ending Pay	Reason for leaving	
Position Held	Name of Supervisor		Supervisor's job title	

Description of Duties, Accomplishments, etc.

What did you like best about this job?

What did you like least about this job?

DO YOU HAVE ANY OBJECTION TO OUR CONTACTING ANY EMPLOYER LISTED?

YES _____ NO _____ If yes, Why? _____

DO YOU HAVE ANY SIGNIFICANT MECHANICAL OR CRAFT EXPERIENCE FROM EITHER JOBS OR HOBBIES? IF SO, PLEASE LIST:

PLEASE MAKE ANY ADDITIONAL COMMENTS YOU MAY HAVE REGARDING YOUR QUALIFICATIONS:

APPLICANT CERTIFICATION

I certify the information contained in this application is correct and understand that falsification of this information is grounds for dismissal, regardless of when such falsification is discovered.

If employed, I understand that I will be a probationary employee for 90 days, during which time either ERMCO or myself may terminate the employment relationship without prior warning or notice. I further acknowledge that if I am employed by ERMCO, my employment is subject to termination with or without cause, at any time, by either ERMCO or me.

If I am hired, I agree to comply with the rules and policies of the company, including any changes that be made from time to time. I also agree to abide by the laws and regulations of any authorized government or government agency pertaining to my employment. Employment with ERMCO is for no definite term, and may be terminated at any time by either the Company or myself. I understand that no agent or representative of ERMCO, except the President, has any authority to make any express or implied agreement contrary to the foregoing. Any agreement made by the President must be in writing.

I consent to take a pre-employment drug test and such future drug or alcohol tests as may be required. I understand that any offer of employment given to me is contingent upon a negative result on my pre-employment drug screening. I also understand that ERMCO absolutely prohibits illegal drug use both on and off the job, since off job use may affect job performance and safety, and that illegal use at any time may result in immediate termination of employment.

I authorize any of the persons, previous employers or educational institutions named in this application to release to ERMCO any and all information they might have concerning me, including records of disciplinary action and reasons for termination of employment. I release all such parties from liability, which may result from furnishing such information. A photocopy of this authorization shall be my authorization for release of information.

Date

Applicant's Signature

APPLICATIONS ARE KEPT ON ACTIVE FILE FOR 90 DAYS.