

APPLICATION FOR EMPLOYMENT AT PUETZ CORPORATION

THIS APPLICATION IS GOOD FOR 60 DAYS

FEDERAL LAW OBLIGATES US TO PROVIDE REASONABLE ACCOMODATION TO THE KNOWN DISABILITIES OF APPLICANTS AND EMPLOYEES, UNLESS TO DO SO WOULD IMPOSE AN UNDUE HARDSHIP. PLEASE LET US KNOW IF YOU NEED AN ACCOMODATION TO COMPLETE THE APPLICATION PROCESS OR TO PERFORM ANY ESSENTIAL ELEMENTS OF THE POSITION SOUGHT.

IMPORTANT: in order for this application to be considered, this must be in original form and all questions must be answered. (If a question does not apply, please mark "N/A", not applicable)

Applicants are considered for all positions and employees are treated during employment, without regard to race, color, religion, sex, national origin, age, disability, or any other prohibited basis of discrimination, as provided under applicable state and federal law.

PLEASE PRINT

Name: _____
Last Middle First

Address: _____
Number Street/RR City State Zip

Telephone: (_____) _____ Social Security Number: _____

Date of Application: _____

Position(s) Applied For: _____

Referral Source: _____ Advertisement _____ Friend _____ Relative _____ Walk-In _____ Employment Agency _____ Other _____

Have you filed an application here before? ___ Yes ___ No if yes, give date _____

Have you ever been employed here before? ___ Yes ___ No if yes, give date _____

Are you employed now? ___ Yes ___ No

May we contact your present employer? ___ Yes ___ No all past employers? ___ Yes ___ No

Are you prevented from lawfully becoming employed in this country? ___ Yes ___ No

If hired, you will be required to submit documents sufficient to establish employment authorization and identity in compliance with the Immigration Reform and Control Act of 1986. While you need not provide this proof of citizenship or immigration status at the time you are interviewed, please be prepared to assure us that you can do so immediately upon being hired.

On what date would you be available for work? _____

Expected salary: _____

Are you available to work: _____ Full-time _____ Part-time _____ Temporary

What days? S M T W T F S

Are you on lay-off and subject to recall? ___ Yes ___ No

Have you been convicted of a felony within the last 7 years? ___ Yes ___ No

(Conviction will not necessarily disqualify applicant from employment. The recency, severity, and pertinence of the conviction to the job will be considered.)

If yes, explain _____

Veteran of the U.S. Military Service? ___ Yes ___ No If yes, Branch _____

List professional, trade, business, or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex, disability or national origin): _____

Driver's License Number and State _____ Any moving violations ___ Yes ___ No

Please describe _____

How did you get your present job? _____

What part(s) appeals least to you? _____

What was the best job you have had (and why)? _____

What goals have you set for yourself?

A. Business goals _____

B. Personal goals _____

What are the obstacles to your success? _____

How would you describe yourself at making decisions? _____

Have you had supervisory responsibility? ____ Yes ____ No

In what roles? (Be specific, including number supervised) _____

What was your most important accomplishment as a supervisor?

What activities appeal to you most? (Rank 1 to 8, 1 being your first preference.)

____ Personal Production ____ Expediting ____ Training ____ Supervising
____ Staffing ____ Organizing ____ Analyzing ____ Planning

As you view yourself, what would you list as your strong points? _____

What are your possible weak points? _____

What valid criticisms have been made of your work? _____

What have you done to overcome these criticisms?

What do you feel you have been able to accomplish in your chosen field of work? _____

What would you like to add that has not been asked? _____

Do you read? ____ Occasionally ____ Frequently ____ Never

What types of articles or books? _____

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disability or other protected status.

1.	Employer	<u>Dates Employed</u>		<u>Work Performed</u>
		<u>From</u>	<u>To</u>	
	Address			
	Telephone Number(s)	<u>Hourly Rate/Salary</u>		
		<u>Starting</u>	<u>Final</u>	
	Job Title	Supervisor		
	Reason For Leaving			
2.	Employer	<u>Dates Employed</u>		<u>Work Performed</u>
		<u>From</u>	<u>To</u>	
	Address			
	Telephone Number(s)	<u>Hourly Rate/Salary</u>		
		<u>Starting</u>	<u>Final</u>	
	Job Title	Supervisor		
	Reason For Leaving			
3.	Employer	<u>Dates Employed</u>		<u>Work Performed</u>
		<u>From</u>	<u>To</u>	
	Address			
	Telephone Number(s)	<u>Hourly Rate/Salary</u>		
		<u>Starting</u>	<u>Final</u>	
	Job Title	Supervisor		
	Reason For Leaving			

EDUCATION

	Elementary School	High School	Vocational/ College	Graduate/ Professional
School Name & Location				
<u>Years Completed</u>	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
<u>Diploma</u>				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills and extra-curricular activities.				
Describe any honors you have received.				

State any additional information you feel may be helpful to us in considering your application.

Do you have a current craft license or certification, if one is required for your craft? ____ Yes ____ No if yes, identify _____

Do you have your own tools? ____ Yes ____ No if yes, what tools do you have? _____

What types of construction equipment can you operate? _____

REFERENCES

Give name, address and telephone number of three references that are not related to you and are not previous employers.

1. _____ () _____
(Name) Phone #

(Address)
2. _____ () _____
(Name) Phone #

(Address)
3. _____ () _____
(Name) Phone #

(Address)
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APPLICANT'S STATEMENT

These answers are true and complete to the best of my knowledge. The company may investigate all statements contained in this application and I understand that any false or misleading information provided may result in my immediate discharge. I UNDERSTAND THAT THIS APPLICATION IS NOT A CONTRACT OF EMPLOYMENT AND THAT IF HIRED, REGARDLESS OF ANY ORAL REPRESENTATIONS TO THE CONTRARY, THE EMPLOYMENT RELATIONSHIP BETWEEN THE COMPANY AND MYSELF IS TERMINABLE AT WILL. ANY CHANGES IN THIS EMPLOYMENT RELATIONSHIP MUST BE MADE IN WRITING.

I also understand that any offer of employment may be conditioned upon a health evaluation by a doctor selected by the Company, to determine whether I can perform the job duties. In addition, I understand a drug and alcohol test may be required depending upon Company policy. I authorize the Company to make a thorough investigation of my past employment, education, and job-related activities and I release from all liability all persons, companies and corporations supplying such information. I also indemnify this Company against any liability, which might result from making such investigation.

Additionally, I authorize the Company to supply my employment record, in it's sole discretion, in whole or in part, to any prospective employer, government agency, or other party, with an interest that the Company deems appropriate.

Signature of Applicant

Date