

ELEVATOR MANUFACTURING

Employment Application

TOBACCO FREE FACILITY

WE USE DIRECT DEPOSIT TO PAY EMPLOYEES. PLEASE BE PREPARED TO PROVIDE DIRECT DEPOSIT INFORMATION.

If you are hired, we will send out W2 Wage and Tax Form Annually no later than January 31st. This form will be emailed to you.

Applicant Information									
Full Name:					Date:				
	Last First			М.І.					
Address:	Street Address				Apartment/Unit #				
	City			State	ZIP Code				
Phone:	I	Email							
Marital Status: Single Married Date of Birth:									
Date Available: Social Security No.:				Desired Salary: <u>\$</u>					
Position App	blied for:								
YES NO YES NO YES NO YES NO Are you a citizen of the United States?									
YES NO Have you ever worked for this company? □ □ □									
YES NO Have you ever been convicted of a felony?									
If yes, explain:									
Education									
High School	: Address:								
From:	To: Did you graduate?	YES	NO □	Diploma:					
College:	Address:								
From:	To: Did you graduate?	YES	NO □	Degree:					
Other:	Address:								
From:	To: Did you graduate?	YES	NO □	Degree:					

Emergency Contact

Full Name:				Phone:					
Address:									
Previous Employment									
Company:				Phone:					
Address:				Supervisor:					
Job Title:	Starting S	Starting Salary:							
Responsibili	ties:								
From:	То:	Reason for Leaving:		:					
May we con	tact your previous supervisor for a reference?	YES	NO □						
Company:				Phone:					
Address:				Supervisor:					
Job Title:	Starting S	Starting Salary: <u>\$</u>							
Responsibili	ties:								
From:	То:	Reason for Leaving:		:					
May we con	tact your previous supervisor for a reference?	YES	NO □						
Company:				Phone:					
Address:				Supervisor:					
Job Title:	Starting S	Starting Salary:							
Responsibili	ties:								
From:	То:	Reason for Leaving:		<u>.</u>					
May we con	tact your previous supervisor for a reference?	YES	NO □						

Military Service							
Branch:	From:	To:					
Rank at Discharge:	Type of Discharge:						
If other than honorable, explain:							
Disclaimer and Signature							
I certify that my answers are true and complete to the best of my knowledge.							
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.							

Signature:

Date:



NOTICE TO APPLICANTS AND EMPLOYEES

Screening tests for illegal drug use may be required before hiring and during your employment here.