

# APPLICATION FOR EMPLOYMENT


**J.V. Manufacturing Co., INC.**  
 1603 BURTNER ROAD  
 NATRONA HEIGHTS, PA 15065-1541  
 724-224-1704

It is our policy to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental handicap, veteran status, or any other legally protected status.

**(PLEASE PRINT)**

|                         |                     |
|-------------------------|---------------------|
| Position(s) Applied For | Date of Application |
|-------------------------|---------------------|

|                     |                        |             |
|---------------------|------------------------|-------------|
| Last Name           | First Name             | Middle Name |
| Address             | Number                 | Street      |
|                     |                        | City        |
|                     |                        | State       |
|                     |                        | Zip Code    |
| Telephone Number(s) | Social Security Number |             |
|                     |                        |             |

|   |           |  |
|---|-----------|--|
| If employed and you are under 18, can you furnish a work permit?  | Yes       | No   |
| Have you ever been employed with us before?<br>If Yes, give date  | Yes       | No   |
| Do any of your friends or relatives work here?  | Yes       | No   |
| Are you currently employed  | Yes       | No   |
| May we contact your present employer?   | Yes       | No   |
| Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status<br><i>Proof of citizenship or immigration status will be required upon employment</i> | Yes       | No   |
| Date available for work     /     /     What is your desired salary range?  |           |  |
| Are you available to work:  | Full-Time | please indicate    1    2    3 shift                     |
|   | Part Time | please indicate    Mornings    Afternoon    Evenings     |
|   | Temporary | please indicate dates available    /    /    -    /    / |
|   | Over Time |  |
| Are you currently on "lay-off" status and subject to recall?  | Yes       | No   |
| Can you travel if a job requires it?  | Yes       | No   |

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

# EDUCATION

|                       | Name and Address of School | Course of Study | Years Completed | Diploma Degree |
|-----------------------|----------------------------|-----------------|-----------------|----------------|
| Elementary School     |                            |                 |                 |                |
| High School           |                            |                 |                 |                |
| Undergraduate College |                            |                 |                 |                |
| Graduate Professional |                            |                 |                 |                |
| Other (Specify)       |                            |                 |                 |                |

Describe any specialized training, apprenticeship, skills and extracurricular activities.

Describe any job-related training received in the United States military.

# ADDITIONAL INFORMATION

## **Other Qualifications**

Summarize special job-related skills and qualifications acquired from employment or other experience.

## **Specialized Skills (Check Skills/Equipment Operated)**

Types of electronic or mechanical equipment that you are qualified to operate or repair:

Software knowledge (MS Office, Outlook, SolidWorks etc.):

Professional Licenses, Certifications or Registrations:

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

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. YES NO

# EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex, national origin disabilities or other protected status.

|                     |            |                                      |  |                |
|---------------------|------------|--------------------------------------|--|----------------|
| Employer            |            | Dates Employed<br>From To            |  | Work Performed |
| Address             |            |                                      |  |                |
| Telephone Number(s) |            | Hourly Rate/Salary<br>Starting Final |  | Work Performed |
| Job Title           | Supervisor |                                      |  |                |
| Reason for Leaving  |            |                                      |  |                |
| Employer            |            | Dates Employed<br>From To            |  | Work Performed |
| Address             |            |                                      |  |                |
| Telephone Number(s) |            | Hourly Rate/Salary<br>Starting Final |  | Work Performed |
| Job Title           | Supervisor |                                      |  |                |
| Reason for Leaving  |            |                                      |  |                |
| Employer            |            | Dates Employed<br>From To            |  | Work Performed |
| Address             |            |                                      |  |                |
| Telephone Number(s) |            | Hourly Rate/Salary<br>Starting Final |  | Work Performed |
| Job Title           | Supervisor |                                      |  |                |
| Reason for Leaving  |            |                                      |  |                |
| Employer            |            | Dates Employed<br>From To            |  | Work Performed |
| Address             |            |                                      |  |                |
| Telephone Number(s) |            | Hourly Rate/Salary<br>Starting Final |  | Work Performed |
| Job Title           | Supervisor |                                      |  |                |
| Reason for Leaving  |            |                                      |  |                |

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business, or civic activities and offices held.  
*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:*

# PROFESSIONAL REFERENCES

|    |           |           |
|----|-----------|-----------|
| 1. | (Name)    | (Phone #) |
|    | (Address) |           |
| 2. | (Name)    | (Phone #) |
|    | (Address) |           |
| 3. | (Name)    | (Phone #) |
|    | (Address) |           |

# EMERGENCY CONTACT

In case of accident or illness please contact: Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

Information to the applicant: As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the US, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms.

I understand and agree to the information shown above:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Equal Employment Opportunity:** While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race, and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applications wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## FOR PERSONNEL DEPARTMENT USE ONLY

Position(s) Applied For Is Open:      Yes      No

Position(s) Considered For:

\_\_\_\_\_  
Date: