

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender national origin, age, disability, marital or veteran status, or any other legally protected status *** Alderfer Glass Co Inc. is an equal opportunity employer ***

	(Plea	se Print)		
Positions Applied For:			Date:	
How Did You Learn About Us?				
[] ADVERTISEMENT [] RELATIVE	E []FRIEND [] IN	IQUIRY [] AGEN	CY [] OTHER	
Last Name:	Fir	st Name:		Middle Name:
Address: Number	Street	City	State	Zip Code
Telephone Number(s):			Social Security Nu	ımber:
Best Time to Contact You at Home is	s:; /			
If you are under 18 years of age, can	you provide proof of	f eligibility to work?	[] YES	[] NO
Have you ever filed an application wi	th us before?		[] YES	[] NO
If YES	S provide date:			
Have you ever been employed by us	before?		[] YES	[] NO
If YES	S provide date(s)			
Do any of your friends and/or relative	es work here?		[] YES	[] NO
Are you currently employed?			[] YES	[] NO
May we contact your present employ	er?		[] YES	[] NO
Have You Ever Been Conviced of a F	Felony?		[] YES	[] NO
Are you prevented from being lawfull due to Visa or Immigration status? (F			[] YES	6 [] NO

Position Desired	
Apart from religious observances, are you available to work: [] Full-Time [] Part-Time	[] Seasonal
Hours Available:	
Would you be willing to work overtime if asked?	
When will you be available to begin employment?	
Are you currently on "lay-off" and subject to recall?	
Can you travel if job would require it?	
Desired salary range? to	/ YEAR

EDUCATION

	Name and Location of School	Course of Study	Yrs. Completed	Diploma/Degree
Elementary School				
High School				
Undergraduate Study				
Graduate Professional				
Other (Details)				

Describe any specialized training, apprenticeship, skills/trade experience and extra-curricular activites

Additional Information

Other Qualifications

Summarize job-related skills and qualifications from employment and any other experience

Specialized Skills

Please list any other skills i.e languages, word processing, fork-lift certification, safety training etc.

*** If you need additional space you may attach another sheet of paper ***

Employment Experience

Start most recent, or present, employer. Please list <u>all</u> work experience.

_1)				
Employer		Reason for Leaving		
Address			Start	Final
Telephone #				
			Start	Final
Job Title Supervisor				
Work Performed				

2) Employer		Reason for Leaving		
Address		Dates Employed	Start	Final
Telephone #		House Poto	2	Final
Job Title Supervisor		Hourly Rate	Start	Final
Work Performed				

	Reason for Leaving		
	Dates Employed	Start	Final
Job Title Supervisor		Start	Final
	Supervisor	Dates Employed Hourly Rate	Dates Employed Start Hourly Rate Start

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Employer	mployer		Reason for Leaving		
Address Telephone # Job Title Supervisor		Dates Employed	Start	Final	
		Hourly Rate Sta	Start	Final	
Work Performed					

5)				
Employer		Reason for Leaving		
Address		Dates Employed	Start	Final
Telephone #				
	•		Start	Final
Job Title	Supervisor			
Work Performed	I	I		

*** If you need additional space you may attach another sheet of paper ***

Professional, trade, business or civic activites and offices held	
You may exclude membership/activity which would reveal gender, race, religion, nationality, age, ancestry	
disability or any other protected status:	

State any additional information that may be helpful in helping us consider your application:

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS FOR THE JOB FOR WHICH YOU ARE APPLYING

The information requested below may only be gathered for a legally permissable reason, including, without limitation to, national security considerations, a legitimate occupational qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination of employment based upon race, color, sex, religion or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most states also prohibit some or all discrimination as described above, as well as some additional types of discrimination based on ancestry, marital status or physical and/or mental handicap and disability.

Are you over 18 years of age? [] YES [] NO

Are you capable of performing in a reasonable manner, with or without reasonable accomodations 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 to the applicant).

[] YES [] NO

References

Name	Phone #	
Address		
Name	Phone #	
Address		
Name	Phone #	
Address		
In your opinion, why should Alderfer Glass Co. consider hiring you?		

If you need additional space you may attach another sheet of paper

Applicants Statement

I certify that the answers given herein are true and complete

I authorize investigation into all statements contained in this application for employment as may be necessary for reasons of reaching an employment decision.

This application for employment shall be considered active for a period not to exceed 60 days. An applicant still looking for a position after that period in time should inquire as whether applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Alderfer Glass Co. Inc. is of an "at will" nature, which means 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 Alderfer Glass Co. Inc.

In the event of employment by Alderfer Glass Co. Inc. I understand that false or misleading information given in my application or subsequent interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations set forth by Alderfer Glass Co. Inc. as Employer.

Signature of Applicant

Date

For Personnel Department Use Only				
Arrange Interview [] YES [] NO				
Remarks				
Employed	[] YES [] NO	Date of Hire		
Job Title		_ Hourly Rate/Salary	Department	
Authorized By:		Name & Title	Date	