



**APPLICATION FOR EMPLOYMENT**

*An Equal Opportunity Employer*

**PLEASE READ BEFORE COMPLETIN THIS APPLICATION:** When completing this application, please be aware that none of the questions are intended to imply any limitations, preferences or discrimination based on any non-job-related information. When completing this form, you may exclude organizations or information that indicate race, color, religion, national origin, disability or other protected classes. Use of this form does not indicate there are positions available nor does your completion of it assure you of a position if one becomes available. However, should a position become available within one year, your application will receive due consideration. After one year, your application will be discarded, and you must complete a new one.

<b>Name:</b>		<b>Today's Date</b>	
<b>Address:</b>		<b>Social Security Number</b>	
<b>City:</b>		<b>State</b>	<b>Zip Code</b>
<b>Phone Number</b>		<b>Email Address:</b>	

<b>Position Applied For:</b>		<b>Date Available for Work:</b>	
<b>Salary Desired:</b>			
<b>Do you have any commitments to other employers that may affect your work here?</b>	<b>Yes:</b>		<b>No:</b>

**If yes, please explain:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>Have you ever worked here before?</b>	<b>Yes:</b>		<b>No:</b>	
<b>If yes, please give date(s) of employment and position(s) held:</b>				
_____				
_____				

<b>Are you authorized to work in the U.S. in the position for which you are applying?</b>	<b>Yes:</b>		<b>No:</b>	
<b>Are you at least 18 years old?</b>	<b>Yes:</b>		<b>No:</b>	
<b>If not, can you submit a work permit?</b>	<b>Yes:</b>		<b>No:</b>	
<b>CLERICAL APPLICANTS ONLY: Can you type</b>	<b>Yes:</b>		<b>No:</b>	

**Please detail any specialized capabilities you may have relative to office equipment or computer hardware and / or software applications:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# EMPLOYMENT HISTORY

Beginning with your current or last position, please give an accurate and complete history of your full and part-time employment history. Please include military and volunteer activities. NOTE: If you have worked for a volunteer organization, you may exclude organizations that indicate race, color, religion, national origin, disability or other protected classes.

1.

<b>Complete Name and Address of Company:</b>				<b>Company's Telephone Number</b>	
<b>What was your title/position?</b>			<b>Describe the nature of your work:</b>		
<b>Dates Employed</b>		<b>Reason for leaving</b>		<b>Name of Supervisor(s)</b>	
<b>From:</b>		<b>To:</b>			

2.

<b>Complete Name and Address of Company:</b>				<b>Company's Telephone Number</b>	
<b>What was your title/position?</b>			<b>Describe the nature of your work:</b>		
<b>Dates Employed</b>		<b>Reason for leaving</b>		<b>Name of Supervisor(s)</b>	
<b>From:</b>		<b>To:</b>			

3.

<b>Complete Name and Address of Company:</b>				<b>Company's Telephone Number</b>	
<b>What was your title/position?</b>			<b>Describe the nature of your work:</b>		
<b>Dates Employed</b>		<b>Reason for leaving</b>		<b>Name of Supervisor(s)</b>	
<b>From:</b>		<b>To:</b>			

4.

<b>Complete Name and Address of Company:</b>				<b>Company's Telephone Number</b>	
<b>What was your title/position?</b>			<b>Describe the nature of your work:</b>		
<b>Dates Employed</b>		<b>Reason for leaving</b>		<b>Name of Supervisor(s)</b>	
<b>From:</b>		<b>To:</b>			

5.

<b>Complete Name and Address of Company:</b>				<b>Company's Telephone Number</b>	
<b>What was your title/position?</b>			<b>Describe the nature of your work:</b>		
<b>Dates Employed</b>		<b>Reason for leaving</b>		<b>Name of Supervisor(s)</b>	
<b>From:</b>		<b>To:</b>			

## EDUCATIONAL BACKGROUND

School	School Name City and State	Number of years completed	Did you Graduate	Certificate/Degree recieved
High School				
College				
College				
College				
Business/Trade				
Other				
Other				
<b>Please detail any other education or specialized training that you have received:</b>				

### REFERENCES OTHER THAN PREVIOUS EMPLOYERS OR RELATIVES

Name:	Address:	Telephone number:

I certify that the answers given in this application are true and complete to the best of my knowledge. I authorized investigation into all statements I have made on this application as may be necessary for reaching an employment decision. Additionally, if CCK Automations, Inc. offers me a position, I understand that I may be asked to submit to medical examination, and my acceptance of the job may be conditional upon passing this exam.

In the event that I am employed by CCK, I understand that any false or misleading information I knowingly provide in my applications or during the interview(s) may result in discharge and/or legal action regardless of when it is discovered. Furthermore, if I am hired by CCK, I understand that my employment will be at will, and neither this document or any other written or verbal understanding constitutes an employment contract unless a written document is agreed upon and signed by the Chief Executive Officer. Furthermore, if I am hired by CCK, I agree to abide by the rules and regulations of the employer and any special agreements reached between CCK and myself.

<b>Signature of Applicant:</b>	<b>Date Completed:</b>