

AL-JON MANUFACTURING, L.L.C.

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, creed, sex, religion, age, national origin, disability, or any other consideration made unlawful by applicable federal laws.

Name:		
Present Address:		
City:	State:	Zip:
Home Phone:	Best time to contact you at home:	
Cell Phone:	Email:	

POSITION APPLIED FOR:

Position:	Date available to start:
Are you currently employed?	Desired salary or rate:
How did you learn of this opening?	
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will you accept temporary employment? <input type="checkbox"/> Yes <input type="checkbox"/> No
When are you available to work: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> First Shift <input type="checkbox"/> Second Shift <input type="checkbox"/> Third Shift <input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings	
Have you ever worked at Al-Jon Manufacturing, L.L.C. before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? Reason for leaving?	
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(proof of employment eligibility and identity will be required)</i>	
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain. <i>Conviction does not automatically exclude you from consideration for employment.</i>	

EDUCATIONAL BACKGROUND:

<i>Type of school</i>	<i>Name and Location</i>	<i>Number of years completed</i>	<i>Graduated? Yes/No</i>	<i>Degree Received Course of Study</i>
High School				
College				
Post Graduate				
Business/Trade				
Other				

If you have a High School Equivalency Diploma (G.E.D.), state name of issuing agency, year issued, and location of issuing agency.

WORK HISTORY:

List in order, present to past, each position you have held. **Account for all periods of unemployment.** Describe fully your specific duties and responsibilities for each position held. Résumés may be attached as a supplement (please enter "See Résumé"). Also list any significant accomplishments you made in each position. If additional space is needed, attach supplementary sheets:

Employer:	Job Title:
Address:	Duties:
Telephone:	Salary/Rate of Pay:
Worked From: To:	Supervisor's Name:

Employer:	Job Title:
Address:	Duties:
Telephone:	Salary/Rate of Pay:
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Address:	Duties:
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SKILLS AND QUALIFICATIONS:

List special qualifications and skills with machines and equipment:

LIST THREE (3) REFERENCES:

Name:	Relationship:
Phone Number:	Years Known:
Name:	Relationship:
Phone Number:	Years Known:
Name:	Relationship:
Phone Number:	Years Known:

READ CAREFULLY BEFORE SIGNING

I certify that all matters contained in this application (and accompanying résumé, if any) are true, and authorize an investigation for the purpose of evaluating my qualifications for employment. This may include requesting information from: former employers (unless otherwise noted), educational institutions, business and professional organizations, local, state and federal law enforcement agencies, individuals with whom I have been associated, and with any others who may have information regarding my competence, character or qualifications. I release AI-Jon Manufacturing, L.L.C. and these entities and individuals from any liability regarding disclosure.

I hereby understand and acknowledge that I am applying for an employment position with AI-Jon Manufacturing, L.L.C. that is "at will," which means that employee or the employer may terminate the employment relationship at any time with or without cause. I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between AI-Jon Manufacturing, L.L.C, and me.

In the event of employment, I understand false or misleading information given in my application, interview(s) or résumé may result in immediate discharge at the time of discovery. I understand, also, that I will be required to abide by all rules and policies of AI-Jon Manufacturing, L.L.C.

I acknowledge that I have read and understand the above information.

Signature of Applicant

Date