

Employment Application

We are an Equal Opportunity Employer

Please print in ink. You must complete entire application

Date:

Applicant Information

Name (first, middle, last)

Address (street, city, state, zip code)

Day Telephone

()

Social Security #

Evening Telephone

()

Are there other names under which you have worked or attended school? Yes No

If yes, please list for reference checking purposes.

Are you legally authorized to work in the U.S.? Yes No

(If hired, you will be required to provide proof of work authorization.)

Are you at least 18 years old? Yes No

If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for and have obtained a valid work permit.

Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations? Yes No If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted. (Convictions are not an automatic bar to employment.)

Do you have any *pending* criminal charges against you? Yes No

If yes, describe the 1) nature of the charges, 2) date issued, and 3) county and state where issued.

Have you ever applied at this company before?

Yes No If yes, when:

Have you ever worked at this company before?

Yes No If yes, when:

Position Applying For

Part-Time or Full-Time Desired

Salary Preference

Shift Preference

When can you start?

How were you referred to the company? Agency Walk-in Friend/Relative _____

Newspaper School Other _____

Special Skills

1. If relevant, please describe word processing speed, software knowledge, and office equipment experience.

2. If relevant, please describe experience using manufacturing machines and equipment.

Employment References

List individuals familiar with your job qualifications (no relatives or personal friends).

Name	Day Telephone ()
	Evening Telephone ()
Address	
Relationship	How long known?
Name	Day Telephone ()
	Evening Telephone ()
Address	
Relationship	How long known?
Name	Day Telephone ()
	Evening Telephone ()
Address	
Relationship	How long known?

Please Read Carefully Before Signing This Form

- All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.
- I authorize the company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.
- I understand that upon receiving a job offer, a physical examination and drug screening may be required. (Note: If this is a job requirement, you will be notified.)
- Regardless of whether or not I become employed by the company, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed, written document.

Signed by Applicant _____ Date _____

Thank you for your interest in our company.

Background Check Release

I hereby authorize the release to MILWAUKEE BEARING & MACHINING, INC. of any information held by parties regarding my prior employment, criminal, credit, driving and educational history as well as information regarding my general character and reputation. I release any providers of this information from any liability for such information. I understand it may be reviewed initially and periodically by MILWAUKEE BEARING & MACHINING, INC. and reported to my prospective/actual employer. I agree falsification of information I provide may make me ineligible for employment or subject to immediate dismissal, if hired. I further acknowledge that MILWAUKEE BEARING & MACHINING, INC. is relying on third party information and I therefore release my prospective employer, and their respective owners, officers, agents and employees from any and all liability arising out of errors or omissions. If not hired, I understand I do have certain rights under the Fair Credit Reporting Act.

Signed _____

Print Name _____

Address _____

City/State/Zip _____

Date _____

NAME _____

DATE _____

MACHINING EXPERIENCE

MACHINE	MODEL	YEARS EXPER.	TOLERANCE USED	SET-UP	OPER- ATE	MAN- UAL	CNC
MACHINING CENTER							
TURNING CENTER							
MILLING MACHINE							
BORING BAR							
BORING MILL/VTL							
TURRETT LATHE							
ENGINE LATHE							
OTHER (SPECIFY)							

CNC CONTROLS EXPERIENCE

CONTROL TYPE	YEARS EXPER.	EDIT	PROGRAM	COMMENTS

MISC. EXPERIENCE

TYPE OF EXPERIENCE	YEARS EXPER.	COMMENTS
BLUEPRINT READING		
DEBURRING		
INSPECTION		
FORKLIFT OPERATION		
OVERHEAD CRANE OPERATION		
CAN YOU CALCULATE FEEDS AND SPEEDS?	YES NO	
DO YOU OWN YOUR OWN TOOLS?	YES NO	