

# WAUKESHA METAL PRODUCTS

## Employment Application

*This Company is an equal employment opportunity employer. All applicants will be considered without regard to age, race, national origin, religion, disability, sex, or other protected status in accordance with applicable federal and state equal employment opportunity laws. This Company will strive to accommodate any physical or mental limitations of employees or applicants in order to accomplish the essential functions of the job.*

<b>APPLICANT INFORMATION</b>						
Last Name	First		M.I.	Date		
Street Address			Apartment/Unit#			
City		State		ZIP		
Phone		Email				
Date Available	Social Security No.			Desired Salary		
Position Applied for			Shift Preference		1 <sup>st</sup>	2 <sup>nd</sup> Weekend
Are you a citizen of the United States?	YES	NO	If no, are you authorized to work in the U.S.?		YES	NO
Have you ever worked for this company?	YES	NO	If so, when?			
Have you ever been convicted of a felony?	YES	NO	If yes, explain			
Do you have any pending criminal charges against you?	YES	NO	If yes, explain			
If required to drive a vehicle for the job applying for, do you have a valid license?	YES	NO	Drivers License #		Issuing State	
Are you at least 18 years old?	YES	NO	If no, employment will be subject to state/federal age requirements and you will need to furnish a work permit.			
How were you referred to the company?						
Agency   Walk-in   Newspaper   Present Employee (Name)						

<b>EDUCATION</b>					
High School		Address			
From	To	Did you graduate?	YES	NO	Diploma/Degree
College		Address			
From	To	Did you graduate?	YES	NO	Diploma/Degree
Other		Address			
From	To	Did you graduate?	YES	NO	Diploma/Degree

**REFERENCES – PLEASE LIST THREE PROFESSIONAL REFERENCES**

Full Name		Relationship	
Company		Phone ( )	
Address			
Full Name		Relationship	
Company		Phone ( )	
Address			
Full Name		Relationship	
Company		Phone ( )	
Address			

**PREVIOUS EMPLOYMENT—START WITH MOST RECENT; USE ANOTHER SHEET IF NEEDED**

Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES	NO
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES	NO
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES	NO

<b>MILITARY SERVICE</b>	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

<b>DISCLAIMER AND SIGNATURE</b>	
<p>I certify that my answers are true and correct to the best of my knowledge. I understand that any false information provided by me will likely result in a refusal to hire or immediate discharge if I am employed. I authorize the Company to investigate my responses on this application and contact any or all my former employers or individuals familiar with me or my employment background for purposes 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.</p> <p><b>I understand that upon receiving a job offer, a physical exam and/or drug screening will be required.</b></p> <p>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 options 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 means of a signed written document.</p>	
Signature	Date

This application will remain "Active" for 30 days from the date signed. If applicant wants to be considered for job openings more than 30 days from date signed a new application must be submitted.

Send to: Waukesha Metal Products  
 N53 W24635 South Corporate Circle  
 P.O. Box 328  
 Sussex, WI 53089-0328  
 Fax: 262.820.2859  
 Email: hr@waukeshametal.com