

APPLICATION FOR EMPLOYMENT

Wink Fasteners Inc. is an Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, marital status, national origin, age, ancestry, sex, veteran status, non-job-related medical condition or handicap, or any other legally protected status. It is our intention that all qualified applicants will be given equal opportunity and that selection decision be based upon job-related factors.

PLEASE PRINT:

Position Applied for: _____

TODAY'S DATE: ___/___/_____ DATE AVAILABLE TO WORK: ___/___/_____

Type of employment desired: Full-time Part-time Temp

Name: _____

Address: _____

Telephone (home or cell): (____) _____ Work: (____) _____

E-mail address: _____

Social Security Number: _____

REFERRAL SOURCE:

Advertisement	Employee	Relative	School
Government	Employment	Agency	Other

Name of Source (if applicable) _____

Are you legally eligible to work in the U.S.? YES NO
(Proof of citizenship or immigration status will be required)

Have you ever filed an application with us before? YES NO
If yes, please give date: ___/___/_____

Are you on lay-off and subject to recall? YES NO

Can you meet the attendance requirements of the position? YES NO

Will you work overtime if required? YES NO

Have you ever been convicted of a felony within the last seven years? YES NO

If YES, give details:

(A "Yes" answer does not automatically disqualify you from employment, since the nature of the offense, date, and the position for which you are applying will also be considered.)

If job involves driving ONLY, do you have valid driver's license? YES NO

Driver's license number/state/expiration: _____

Has your driver's license been suspended/ revoked in the last three years? YES NO

If YES, please give details:

If hired, do you have a reliable means of transportation to and from work? YES NO

If YES please explain:

Education	School	No. of Years	Diploma/Degree Certificate	Area(s) of Study
High School/GED:				
College University:				
Vocational/Technical:				

List any seminars, classes or other education not listed above which may help qualify you for this position:

EMPLOYMENT HISTORY

List your last 4 employers, assignments or volunteer activities, starting with the most recent, including military experience. Please explain any gaps in employment in comments section below. You must complete this section even if attaching a resume.

1) Employer: _____

Address _____

Telephone: (____) _____ Job Title _____

Dates Employed: FROM ___/___/____ TO ___/___/____

Hourly Rate/Salary: Starting \$ _____ PER _____ Ending \$ _____ PER _____

Immediate supervisor & title: _____

E-mail address of supervisor: _____

Reason for leaving: _____

May we contact for reference? _____ YES _____ NO _____ LATER

List the essential job functions of final position:

What did you like the most about this position?

What did you like the least about this job?

What value did you add to this company or customers?

2) Employer: _____

Address _____

Telephone: (____) _____ Job Title _____

Dates Employed: FROM ___/___/___ TO ___/___/___

Hourly Rate/Salary: Starting \$ _____ PER _____ Ending \$ _____ PER _____

Immediate supervisor & title: _____

E-mail address of supervisor: _____

Reason for leaving: _____

May we contact for reference? _____ YES _____ NO _____ LATER

List the essential job functions of final position:

What did you like the most about this position?

What did you like the least about this job?

What value did you add to this company or customers?

3) Employer: _____

Address _____

Telephone: (____) _____ Job Title _____

Dates Employed: FROM ___/___/___ TO ___/___/___

Hourly Rate/Salary: Starting \$ _____ PER _____ Ending \$ _____ PER _____

Immediate supervisor & title: _____

E-mail address of supervisor: _____

Reason for leaving: _____

May we contact for reference? _____ YES _____ NO _____ LATER

List the essential job functions of final position:

What did you like the most about this position?

What did you like the least about this job?

What value did you add to this company or customers?

4) Employer: _____

Address _____

Telephone: (____) _____ Job Title _____

Dates Employed: FROM ___/___/___ TO ___/___/___

Hourly Rate/Salary: Starting \$ _____ PER _____ Ending \$ _____ PER _____

Immediate supervisor & title: _____

E-mail address of supervisor: _____

Reason for leaving: _____

May we contact for reference? _____ YES _____ NO _____ LATER

List the essential job functions of final position:

What did you like the most about this position?

What did you like the least about this job?

What value did you add to this company or customers?

Additional Information

List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability or any other protected status.

List any languages other than English that you can speak, read or write that could be of benefit to the position applied for:

	Fluent	Good	Fair
Speak	_____	_____	_____
Read	_____	_____	_____
Write	_____	_____	_____

Identify what skills or certification you possess related to this position:

If you are hired, what value would you add to our company?

PLEASE READ EACH STATEMENT CLOSELY AND INITIAL EACH ACKNOWLEDGING YOUR UNDERSTANDING

DISCLOSURE TO APPLICANTS CONCERNING DRUG/ALCOHOL TESTING *Initials:* _____

If you are offered a position with Wink Fasteners, you will be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. Negative test results are required as a condition of employment.

COMPLETE AND ACCURATE INFORMATION *Initials:* _____

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE COMPANY.

Signature

Date

For Sales Positions: I authorize previous employers to provide sales volume I sold and information that may be helpful in making a hiring decision.

Applicant's Signature

Date