

EMPLOYMENT APPLICATION

Precision Gage & Tool Company is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status, non-job related disability or any other legally protected status. Information requested on this application will not be used for any purpose prohibited by law. This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

PERSONAL INFORMATION:

Name

Last	First	MI
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Present Address

No.	Street		
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City	State	Zip	Home Phone
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Social Security No. _____ - _____ - _____

Are you a citizen of the U.S. or do you have a legal right to be employed in the United States?
Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, state the date of conviction, county and state:

Note: (Conviction will not necessarily disqualify you from employment with the Company.)

GENERAL INFORMATION:

Are you seeking: Full time _____ Part time _____ Temporary _____

Position applied for: _____

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. Yes _____ No _____

Can you travel if your job requires it? Yes _____ No _____

Can you work overtime if your job requires it? Yes _____ No _____

Date available to start: _____ Salary desired: \$ _____

Have you ever applied or worked for the Company before? Yes _____ No _____

If yes, state when and where you applied and/or worked:

List names and relationship of any family members currently employed by the Company:

How did you learn of this opening? _____

Do you have any commitment or agreements with another employer that might affect your employment with the Company? Yes _____ No _____

If yes, please explain:

EDUCATION:

Name, Address, Location, Dates:

High School: _____ Did You Graduate? _____

Circle Grade Completed: 1 2 3 4 City: _____ State: _____

College: _____ Graduation _____

City _____ State _____ Date From _____ Date To _____

Trade School: _____ Diploma _____

City _____ State _____ Date From _____ Date To _____

If you did not graduate, why did you leave? _____

List any job-related scholastic honors, offices, or activities: _____

List and describe any other job-related school or specialized training:

MILITARY:

Have you ever served in the military? Yes _____ No _____

Service Branch _____ Date Entered _____ Date Separated _____

WORK HISTORY:

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time, including military service and any periods of unemployment. If self-employed, list firm name and supply business references.

PLEASE GIVE MONTH AND YEAR, AND COMPLETE THE FORM IN ITS ENTIRETY.

Employer Name, Address and Telephone Number	Date From	Date To	Salary/Monthly Earnings	Nature of Work/Title
	Full Time	Part Time	Name of Supervisor	Reason for Leaving

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SUPPLEMENTAL EMPLOYMENT INFORMATION:

If you worked in any of your previous positions under another name, please give that name:

Are you presently employed? Yes _____ No _____

May we contact the above-referenced employers? Yes _____ No _____

If no, please state the employer and the reason for your request. _____

Have you ever been fired or asked to resign from a job? Yes _____ No _____

If yes, explain:

SPECIAL SKILLS:

Do you type? Yes _____ No _____ Words per minute: _____

Have you had any computer or word processing experience or training? Yes _____ No _____

If yes, explain:

REFERENCES: Give three references (do not list relatives):

Name	Phone No.	Occupation
_____	_____	_____
_____	_____	_____
_____	_____	_____

APPLICANT STATEMENT:

I certify that all information I have provided in order to apply for and secure work with Precision Gage & Tool Company is true, complete and correct.

I expressly authorize, without reservation, Precision Gage & Tool Company, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I understand that, if offered employment, I will be required to submit to a blood, breath, urine and/or saliva test to determine the presence or use of alcohol and/or controlled substances. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment, and refusal to take such tests when asked will be grounds for my immediate termination.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing, directed personally to me and signed by me and Precision Gage & Tool Company's President.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

Precision Gage & Tool Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). The Company takes all complaints of harassment seriously, and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date _____

**DISCLOSURE AND AUTHORIZATION OF BACKGROUND INVESTIGATION
PURSUANT TO THE FAIR CREDIT REPORTING ACT**

DISCLOSURE

I have been asked by Precision Gage & Tool Company to furnish information for use in reviewing my background and qualifications. As part of its investigation and its evaluation of me for employment, promotion, reassignment or retention as an employee, I understand that Precision Gage & Tool Company may now or later during the course of my employment, investigate and obtain a consumer report, which includes information bearing upon my creditworthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living. Precision Gage & Tool Company may obtain information contained in employment records, educational records, military records, court records, credit records, driving records, and criminal records. I understand that this investigation may include interviews with references or others. I understand that my employment or continued employment is contingent upon the successful completion of this background investigation.

AUTHORIZATION

I hereby authorize Precision Gage & Tool Company, or any of its agents, to conduct an investigation of my background and qualifications. I authorize the release of any information pertaining to my background and qualifications, including those categories of information listed above, whether the information is of public record or not. This authorization shall remain effective for any future investigations by Precision Gage & Tool Company.

Signature _____ Date _____

Print Name _____ Social Security Number _____

Current Address _____

Driver's License or State ID:

Number _____ State _____ Expiration Date _____

Please list additional addresses occupied in the past 7 years and the number of years at each address:

Number of Years _____ Address _____
Street Address City, State Zip Code

Number of Years _____ Address _____
Street Address City, State Zip Code

Number of Years _____ Address _____
Street Address City, State Zip Code