

## 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:

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

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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:

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**EDUCATION:**

Name, Address, Location, Dates:

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High School: \_\_\_\_\_ Did You Graduate? \_\_\_\_\_

Circle Grade Completed: 1 2 3 4 City: \_\_\_\_\_ State: \_\_\_\_\_

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College: \_\_\_\_\_ Graduation \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Date From \_\_\_\_\_ Date To \_\_\_\_\_

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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: \_\_\_\_\_

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

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**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 \_\_\_\_\_