

# FELDMEIER EQUIPMENT, INC.

APPLICATION FOR EMPLOYMENT

APPLICANTS WILL BE TESTED FOR ILLEGAL DRUGS

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

DATE: \_\_\_\_\_

NAME \_\_\_\_\_  
LAST FIRST MIDDLE MAIDEN

PRESENT ADDRESS \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

POSITION APPLIED FOR: \_\_\_\_\_  
Salary desired: \_\_\_\_\_  
How many hours can you work weekly: \_\_\_\_\_

DAYS/HOURS AVAILABLE TO WORK  
NO. PREF \_\_\_\_\_ Thurs. \_\_\_\_\_  
Mon \_\_\_\_\_ Fri. \_\_\_\_\_  
Tues. \_\_\_\_\_ Sat. \_\_\_\_\_  
Wed. \_\_\_\_\_ Sun. \_\_\_\_\_

When available to work? \_\_\_\_\_ Can you work nights? \_\_\_\_\_

How did you learn Feldmeier Equipment was hiring? \_\_\_\_\_

## EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	MAJOR & DEGREE
High School			
College			
Bus. or Trade School			
Professional School			

Have you ever been convicted of a crime?  YES  NO | If yes, please explain \_\_\_\_\_

Do you have a driver's license?  YES  NO | What is your means of transportation to work? \_\_\_\_\_

Driver's license  
Number: \_\_\_\_\_ State of issue: \_\_\_\_\_ Operator?  Commercial (CDL)?

Expiration Date: \_\_\_\_\_

Have you had any accidents during the past three years? \_\_\_\_\_ How many? \_\_\_\_\_

Have you had any moving violations during the past three years? \_\_\_\_\_ How many? \_\_\_\_\_

## Military

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Rank at Discharge: \_\_\_\_\_

If other than honorable, explain:  
Specialty \_\_\_\_\_ Date Entered: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

**APPLICATION FOR EMPLOYMENT**

**Please list two references other than relatives or previous employers:**

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____ Telephone No.	_____ Telephone No.

**WORK EXPERIENCE**

**Please list your work experience for the past 5 years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.**

Name of Employer Address City, State, Zip Phone Number	Name of Last Supervisor	Employment Dates	Pay or Salary
		From To	Start Final
Your last job title:			

Reason for leaving (be specific)  
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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Your last job title:			

Reason for leaving (be specific)  
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact your references? — Yes — No  
 May we contact your present employer? — Yes — No  
 Did you complete the application yourself? — Yes — No  
 If not, who did?

APPLICATION FOR EMPLOYMENT

**GENERAL AREAS OF SKILL AND ABILITY:  
Check all that apply**

- |                            |                            |
|----------------------------|----------------------------|
| MIG Welding                | years of experience: _____ |
| TIG Welding                | years of experience: _____ |
| Grinding Metal             | years of experience: _____ |
| Polishing Metal            | years of experience: _____ |
| Ability to read blue print | years of experience: _____ |
| Sheet Metal Fabrication    | years of experience: _____ |
| Machine Operation          | years of experience: _____ |
| Math Skills                |                            |

Other experience and/or skills that would make you a qualified candidate for a position at Feldmeier Equipment:


**ATTACH RESUME IF NEEDED**

**PLEASE READ CAREFULLY**

**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by FELDMEIERS EQUIPMENT, INC., (hereinafter called the "Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company, or to alter in any respect the employment-at-will relationship between it and the undersigned if any, and that such relationship, if any, cannot be altered. Both the undersigned and the Company, may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice, though such cause is not required. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references and others and hereby release the Company from any liability as a result of such contact.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations for bona fide job requirements.

I understand that, in connection with the routine processing of my employment application, the Company may request from a consumer reporting agency an investigative consumer report, including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment, if any, with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant \_\_\_\_\_

Date: \_\_\_\_\_

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.