Application for Employment

Date	Last Name	Fi	First Name			(Maiden Name)		
Address	Address			Mailing Address (if different)				
City, State, Zip			City, State, Zip					
Phone		Alternate Phone		Social S	Security Nur	mber		
Have you ever applied for employment with us in the past? Yes No If yes, when and where?			Do you have: Answering machine Yes No Caller ID Yes No Voicemail Yes No					
Are you 18 years old or older? Yes No How did you hear of us (who and number)? If not, can you furnish a work permit if needed? Yes No								
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? (Proof of citizenship or immigration status will be required if employed) Yes No								
Have you been convicted of	of a felony? Yes	s No If ye	es, please ex	plain:				
Position applied for: Available start date: Acceptable starting pay: Shifts available (circle all that apply) 1 st 2 nd 3 rd								
Do you have any impairments, physical, mental or medical that would interfere with your ability to do the job for which you have applied? Yes No If yes, please explain:								
Do you possess a valid driver's license? Yes No Do you have your own transportation? Yes No If no, please describe how you plan on getting to and from work: How far (in miles) are you willing to travel for work?								
Employment History			acess, the			-		
Company		Address		10	P	hone		
Dates: FromT	o Pa	ay: Start	_ End	Supervisor				
Duties:			Rea	son for leaving				
Company		Address_			P	hone		
Dates: FromT	o Pa	ay: Start	_ End	Supervisor				
Duties:			Rea	son for leaving				
Company		Address_			P	hone		
Dates: FromT	o Pa	ay: Start	End	Supervisor				
Duties:			Reas	son for leaving				
Company		Address	ook Sirks to silke the part of the		P	hone		
Dates: FromT	o Pa	ay: Start	_End	Supervisor				
Duties:		11	Reas	son for leaving				

Return to: J/R Metal Frames, PO Box 503, Belgrade, ME 04917

or fax: 207-465-9452

Person to notify in case of an	emergency:	Relation	Telepnone	number(s):
Please list all special skills, tracertifications you hold:	aining and knowledge y	ou possess relating to	o the job position, includir	ng any special licenses or
Have you ever served in any bear you presently a member in Have you ever had any job reliquiposes?	n the National Guard or	r Reserve? Yes		nsidered for evaluation
Education: Please list starting School Name and Location (C		including college and/ Courses of Study	or vocational training:	Graduate Yes No Yes No Yes No
Please list three references (o least one year:	ne of which must be a Address and F	 Control of the Control of the Control	e), not related to you that	you have known for at Years Acquainted
Applicants are considered for status, sexual orientation or th				, age, marital or Veteran
No. of the Control of	ASE READ THE FOLLO	OWING BEFORE SIG	SNING THIS APPLICATION	
employment decision. I unders In the event of employment, I understand als	understand that false o	or misleading informati	on given in my applicatio	n or interview(s) may result
I certify that the answers given I undertand that if I am a claim work may affect my eligibility for	ant for Unemployment	Compensation Benef		r an accepted interview or
Signature of Applicant		Date		

Name		Date			_
INDUSTRIAL Please circle the skil	ls or relevant work experi	ence you have	qualification	for:	
Warehouse Forklift Operator: Certified? Y N Shipping Receiving Order Selector Inventory Packing Assembly Construction: Framing Roofing Masonry Demolition Carpentry – Rough Tile Carpentry – Finish Drywall – Finish Other: Have own tools? Y N	Metal Work – CNC Oper Machine Operator Machine Set-Up Industrial Maintenance: Painting/Needle Gun Security: Spec. Clearance? Y Level?			Welding: MIG Boat Building: Fiberglass, V Painting: Interior Wallpaperin Residential Own Equipn Driver: Class A Doubles? Y Triples? Y Flatbed? Y Refrig Vans	Wooden Exterior G Commercial nent? Y N Class B N N N N N Y N ovide proof of clean
Equipment Operator (circle all that a Front End Loader, Size	Dozer Skidde Crane: Type and Size_				- Inc.
OFFICE SUPPORT / CLERICAL P	lease circle the skills or r	elevant work ex	cperience yo	ou have qualific	eation for:
Multi-Line Phone, #lines	Filing: Alpha I	Numerical	Data	Entry: Alpha	Numerical
Computer Programs (circle all that a MS Word: ver 98 ver 2000BeginnerIntermediate MS Excel: ver 98 ver 2000BeginnerIntermediate MS Outlook: ver 98 ver 200	AdvancedAdvanced	PC Operating ver 97-98 2 Macintosh Linux MAX 90 (Stat	2000 ME		
BeginnerIntermediate MS Access: ver 98 ver 200 BeginnerIntermediate		AS-400			
Can you do the following: Mail Merge? Y N Create Forms? Y N Formulas? Y N Charts/Graphs? Y N Flowcharts? Y N Macros? Y N			¥.		
Other Software (indicate any/all that	at apply):				
Quickbooks or Quickbooks PRO Ac Other(s)?	counting, version	be Others		3	