



EMPLOYMENT APPLICATION FORM

We are an equal opportunity employer, and all qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status, or any other legally protected class.

The FAA requires our company to test for drugs and alcohol under certain job descriptions.

Name: _____ Today's Date: _____

Address: _____
(Street)

Address: _____
(City) (State) (Zip)

Telephone #: _____ Work #: _____

Dates of Residency: _____

Previous Address: _____

Dates of Residency: _____

Position Applied for: _____

How were you referred to us? (If through an agency, please give the name):

Have you ever applied here before? Yes ___ No___ Date _____

If you are offered employment, as a condition of employment you will be required to submit proof of your identity and legal right to work in the United States. Can you do so?

Yes _____ No _____

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

If yes, please explain the date, place, and disposition of the case. (A conviction will not necessarily disqualify you from employment).



EMPLOYMENT HISTORY

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time.
Incomplete information could disqualify you from further consideration.

From	To	Employer Name	Telephone
Job Title		Address	
Supervisor's Name and Title		Describe the Work Performed	
Reason for Leaving			
From	To	Employer Name	Telephone
Job Title		Address	
Supervisor's Name and Title		Describe the Work Performed	
Reason for Leaving			
From	To	Employer Name	Telephone
Job Title		Address	
Supervisor's Name and Title		Describe the Work Performed	
Reason for Leaving			
From	To	Employer Name	Telephone
Job Title		Address	
Supervisor's Name and Title		Describe the Work Performed	
Reason for Leaving			

From	To	Employer Name	Telephone
Job Title		Address	
Supervisor's Name and Title _____		Describe the Work Performed _____	
Reason for Leaving			

Education	Name Of School	Degree Received	Course of Study
High School			
College or University			
Trade, Business School			
Other Education			

Additional Aptitudes: _____

List licenses and/or certificates: _____

Special training or skills: _____

Please use the space below to list personal aptitudes you feel would be of value:

Date Available: _____ Salary Desired: _____

IMPORTANT, PLEASE READ CAREFULLY BEFORE SIGNING:

I understand that failure to reveal any prior employer, or giving false or misleading information on any part of this Application for Employment can result in disqualification for employment consideration, or if hired, may be grounds for termination from Magee Plastics Company. I understand that if I am hired, my employment is for no definite duration, and may be terminated at any time without prior notice.

I attest with my signature below that I have provided to Magee Plastics Company, true and complete information on this application.

Date _____ Signature _____



Please check column A, B, or C according to your experience with the following items.

	-A-	-B-	-C-
	Have working experience	Just familiar	No knowledge
Drill Press			
Table Saw			
Radial Arm Saw			
Band Saw			
Disc Sander			
Belt Sander			
Shear Press			
Wood Lathe			
Metal Lathe			
Milling Machine			
Router			
Bench Grinder			
Airless Paint Spray			
Arc Welder			
Drafting			
Read Blueprints			
Read Micrometer			
Read Scale in 1/64 th			
Plumbing Hook-up			
Electrical Wiring			
Sharpen Drill Bits			
Working with Wood			
Working with Epoxy			
Working with Aluminum			
Working with Steel			
Working with Plexiglas			
Working with Adhesive			
Model Making			
Furniture Making			
Sheet Metal			
Other			

Name: _____