



PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5

Date _____

Name _____
Last First Middle Maiden

Present Address _____
Number Street City State Zip

How long _____ Social Security No. _____ - _____ - _____

Telephone () _____ Cell Phone () _____

Email Address _____

If under 18, please list age _____

Position applied for _____

Salary desired _____

Employment desired FULL-TIME ONLY _____ PART-TIME ONLY _____ FULL- OR PART-TIME _____

When available for work? _____

Do you currently have a relative working for Neill-LaVielle or Bearings of Kentucky? Yes _____ No _____

Have you ever been employed before? _____ If yes, give dates From _____ to _____

Are you legally eligible for employment in this country? Yes _____ No _____

Will you travel if the job requires it? Yes _____ No _____

Will you work overtime if the job requires? Yes _____ No _____

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? Yes _____ No _____

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes _____ No _____

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes _____ No _____

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DO YOU HAVE A DRIVER'S LICENSE? Yes _____ No _____

What is your means of transportation to work? _____

Driver's license # _____ State of issue _____ 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? _____

SKILLS (please check those that apply)

Word _____

Excel _____

Outlook _____

PowerPoint _____

Internet Explorer _____

10 Key _____ WPM _____

Typing _____ WPM _____

CNC Production Saw _____

CDL Driver's License _____

Forklift _____

Overhead Crane _____

Able to Read Measuring Tape _____

Hazmat _____

Please list three personal references that are not related to you.

Name _____

Title _____

Relationship to you _____

Telephone # _____

Number of years known _____

Name _____

Title _____

Relationship to you _____

Telephone # _____

Number of years known _____

Name _____

Title _____

Relationship to you _____

Telephone # _____

Number of years known _____

EDUCATIONAL BACKGROUND

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	YEARS COMPLETED	MAJOR/DEGREE
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Bus. Or Trade School	_____	_____	_____	_____
Professional School	_____	_____	_____	_____

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WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held.

If you were self-employed, give firm name. Attach additional sheets if necessary.

May we contact your present employer? Yes _____ No _____

Explain any gaps in your employment _____

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

Name of employer _____

Address _____

City, State, Zip Code _____

Phone number/Immediate Supervisor _____

Employment _____ Date _____ to _____ Salary _____

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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HAVE YOU EVER BEEN PLED "GUILTY" OR "NO CONTEST" TO , OR BEEN CONVICTED OF A CRIME? Yes _____ No _____

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

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APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I expressly authorize, without reservation, the employer, 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 and 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 a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 60 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 to reapply and fill out a new application.

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 and signed by the employer's president.

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

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 (1) eliminate me from further consideration for employment, or (2) 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 _____

Did you complete this application yourself? Yes _____ No _____

If not, who did? _____

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