

9937 Sampson Ave, Lake City, PA 16423-1543 PH: 814-774-3144 Fax: 814-774-2368

## **APPLICATION FOR EMPLOYMENT**

Kirk Precision Machining is an Equal Opportunity Employer. You are not required to give any information on this form that is prohibited by applicable laws.

ANY OFFER OF EMPLOYMENT WILL BE CONDITIONED UPON THE RESULTS OF POST-OFFER MEDICAL EXAMINATIONS AND/OR INQUIRIES WHICH ARE REQUIRED OF ALL ENTERING EMPLOYEES AND UPON PASSAGE OF A TEST DESIGNED TO MEASURE YOUR ABILITY TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION OFFERED.

Use an additional sheet if this form does not provide sufficient space for you to complete your answer to any item.

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Kirk Precision Machining depends on each employee to work the shift for which he/she is hired on a

Will you be able to meet the attendance requirement for any position offered?

First Choice:

Second Choice:

regular, full-time basis.

-	for Kirk Precision Machinin		es, please give dates and
			ou have worked there, your
Have you ever worked i	urrent employer for a refer	re? If yes, plea	ase state where and for how
<u>EDUCATION</u>			
	Name and Location Of School	Course of Study	Did You Graduate?
Grammar School			
High School			
College / University			
Night School			
Trade, Business or Other School			
	ourses, training, seminars, for which you are applyin	·	ou have completed that mig
Please list any licenses, position(s) for which yo	certificates, or professiona u are applying:	al accreditations you hol	d that might relate to the

III.

## IV. EMPLOYMENT HISTORY

Give names and addresses of all previous employers (including Civil Service). Please list most recent position first and then your other positions in descending order.

Name and Address	Immediate Supervisor's Name	Kind of Work	Date Started	Date Left	Reason for Leaving
Rank at discharge:		Type C	or discharge:		
PERSONAL REFERENCE	CES (Do not use	relatives or for	mer employ	ers)	
PERSONAL REFERENCE	CES (Do not use	relatives or for	mer employ _Phone	ers)	
PERSONAL REFERENCE Name Address	CES (Do not use	relatives or for	mer employ _Phone	ers)	
PERSONAL REFERENCE Name Address Name	CES (Do not use	relatives or for	mer employ Phone	ers)	
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PERSONAL REFERENCE Name Address Name Address Name Address OTHER INFORMATIO	CES (Do not use	relatives or for	mer employ Phone Phone Phone	ers)	

Please provide any other information not requested tha	t you	feel	will	be	helpful	to	Kirk	Precision
Machining in evaluating your suitability for employment:								

I hereby certify that the foregoing statements are true and correct to the best of my knowledge and belief and hereby grant Kirk Precision Machining permission to verify such answers and investigate work and personal references. I understand that any false statements on the application or in any interview may be considered sufficient reason for rejection of this application or for dismissal if such false information is discovered subsequent to my employment. I understand that no representation made by Kirk Precision Machining or its supervisors, whether in writing or made orally, constitutes a contract of employment or implies any promise or limitation regarding specific policies or benefits, etc., or limits Kirk Precision Machining's right to discharge me without notice or liability to me for salary or wages, except such as may have been earned up to the date of termination of service. I also understand that my salary, wages, benefits and other terms or conditions of employment are subject to change by Kirk Precision Machining and if hired, I will be notified of these changes. I also agree, if hired, that upon the termination of my employment with Kirk Precision Machining, whether upon my decision or Kirk Precision Machining, that Kirk Precision Machining may offset and deduct from my final paycheck any and all amounts I owe to them for any reason, including but not limited to salary advances, employee purchases, loans and losses or damages which Kirk Precision Machining sustains as a result of my willful or negligent acts. I hereby agree to take physical and other examinations whenever required by Kirk Precision Machining. I also understand that Kirk Precision Machining is considering establishing a smoke free environment in many areas of the organization and may be banning the use of all smoking materials in these areas by employees while on the premises. I authorize the employers, schools or persons named above to give any information regarding my previous employment, character, general reputation and personal characteristics, together with any information that they have regarding me whether or not it is in their records. I understand that under the Federal Fair Credit Reporting Act, I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure by Kirk Precision Machining of the nature and scope of any investigation requested by Kirk Precision Machining of a consumer reporting agency. If this application for employment is denied either wholly or partly because of information contained in a consumer report from a consumer reporting agency, I understand that Kirk Precision Machining shall so advise me and shall supply the name and address of the consumer reporting agency making the report. I hereby release said agency, employers, schools or persons from all liability for any damage issuing this information. In addition, if accepted for employment, I hereby agree to abide by the rules and regulations of Kirk Precision Machining.