

Graduate

Trade School

School Business or

614 West English Corydon, Iowa 50060 (641) 872-1005



APPLICATION FOR EMPLOYMENT

Applicant Information										
Name				Date						
Address										
Street				City		ZIP Code				
Phone:				Position Applied For?						
Are you under 18 years of age? Yes No Earnings Expected: \$										
Have you previously worked for this company? Yes No If yes, when?										
Can you, if hired, submit verification of your legal right to work in the U.S.? Yes No (You will be required upon employment to submit documents sufficient to verify your legal right to work in the United States)										
			Referral Infor	mation						
How were you referred to Shivvers for employment?										
□ Walk-In □ Newspaper Ad □ Company website □ Social Media										
☐ Employee Referral (Name) ☐ Other (please specify)										
Military Service										
Have you served in the U.S. Armed Forces? Yes No If yes, which branch of service?										
Date of discharge?										
Education										
TYPE OF SCHOOL	NAME OF SCHOOL		IRSES IRED IN	GRADUATED	DEGREE RECEIVED	YEAR GRADUATED				
High School				Y / N						
College				Y / N						

Y / N

Y / N

Work History									
List below the names of your current and/or previous 3 employers, beginning with the most recent. Employer's Name City, State		From MO/YR	To MO/YR	Current (last) Salary	Reason for Leaving	Name of Immediate Supervisor			
I	Telephone Number								
1									
2									
3									
Indicate by numberany of above employers you do not wish us to contact.									
			Referer	nces					
1	References (Not former employers or relatives.)				P	hone Number			
1	1								
2									
3									
					•				
Other Information									
Why do you feel you are qualified for the position you are applying for?									
What types of machines are you familiar with?									
Disclaimer & Signature									
I hereby certify that the answers given and statements made are true and correct. I understand that any omission or falsification of information will be sufficient cause for disqualification from further consideration of employment or for dismissal. I understand that any offers of employment are contingent on successful completion of a post-offer physical exam and drug screen. I understand employment at this organization is "at will", which means employment may be terminated by the employee, or by this company, at any time, with or without cause. I hereby authorize all my previous employers and references to furnish any information concerning my personal character and employment records.									
Sigi	Signature Date								