

## APPLICATION FOR EMPLOYMENT

*Please Print Clearly and Answer All Questions. Resumes are not a substitute for a completed Application.*

**TO APPLICANT:** We appreciate your interest in Horizon Systems Machining, Inc. A clear and full understanding of your background and work history will aid in the consideration for the position for which you are applying. Applicants will be considered without discrimination because of race, color, sex, age, religion, national origin, marital status, disability, veteran's status, or other legally protected status. Criminal background checking will be addressed at a later stage in the candidate process in keeping with and to the extent allowed by applicable law.

Name: \_\_\_\_\_ Telephone Number: (    ) \_\_\_\_\_  
 Present Address (Street, Apt. or Unit Number): \_\_\_\_\_  
 City / State / Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Position applying for: \_\_\_\_\_ Date: \_\_\_\_\_

How did you learn about this position? \_\_\_\_\_

Have you worked for or applied for a position with our Company before? If yes, when and what position? \_\_\_\_\_

Do you have any relatives working here? If yes, who? \_\_\_\_\_ *(information is utilized for reporting structure purposes only)*

Are you legally eligible for employment in the United States? Yes  No  Desired Salary: \_\_\_\_\_

Are you 18 years of age or older? Yes  No  If no, please state your age: \_\_\_\_\_

Are you seeking Full or Part-time work? Full-time  Part-time  What shift (if applicable)? \_\_\_\_\_

When are you available to begin work? \_\_\_\_\_

List computer, foreign language and/or other work experience/skills which you feel qualifies you for the job for which you are applying:

If a license is required for the position for which you are applying (drivers or other), please list the following:

License Number:	State of Issuance:	License Type:	
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Education	School Name and Location	Course of Study	Number of Years	Degree/Diploma
High School				
College				
Post-Graduate				
Bus./Tech./Trade				

References: List three people other than relatives who are in the position to evaluate your current or previous employment experience. Preferably former supervisors or people with whom you have worked.

Name	Title	Company	Phone

**LIST BELOW ALL PRESENT AND PAST EMPLOYMENT BEGINNING WITH MOST RECENT**

Name & Address of Company ( <i>Describe business type</i> ) _____	Dates Employed From _____ To _____
Phone _____	Job Title _____
Supervisor's Name _____	Compensation _____
Reason Left _____	Start _____ Last _____
Duties _____	

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Phone _____	Job Title _____
Supervisor's Name _____	Compensation _____
Reason Left _____	Start _____ Last _____
Duties _____	

I certify that all the information on this application, my resume, or any supporting documentation is correct, and I understand that any misrepresentation or omission of any information will result in disqualification from consideration for employment or, if employed, my termination.

I understand that this application is not a contract, offer or promise of employment. If hired, I will be able to resign at any time for any reason. Likewise, the Company can terminate my employment at any time, with or without any reason.

I authorize the Company or its agents to investigate all statements contained in this application and/or resume. Criminal background checking will be addressed at a later stage in the candidate process in keeping with and to the extent allowed by applicable law. A credit and background check may be made including, but not limited to, consumer credit history, criminal history, driving record, employment, military, education and general public records which will provide information concerning my character and general reputation. I hereby authorize my former employers, educational institutions or other reference providers to furnish all information pertaining to my work or educational record. I release my former employers, educational institutions, supervisors, and references from all liability due to furnishing information to this company or its agents.

Should I wish to obtain a copy of the consumer credit history report (if applicable), it will be provided upon written request. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations or organizations for furnishing such information.

I understand that, as a condition of employment, I may be required to sign a non-compete agreement, a conflict of interest statement, and/or an arbitration agreement. Except where prohibited under statutory law, I hereby agree to arbitrate all disputes regarding my application for employment and any employment-related matters rather than resolving them in court or other forum. I understand that the Company may now have, or may establish, a drug-free workplace or a post-accident drug-testing program. If it has one now and I am offered a conditional offer of employment, I agree to work under the conditions requiring a drug-free workplace. I also understand that all employees of the location may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or controlled drugs. If detected, the offer of employment will be withdrawn. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo random, fitness for duty, return to work and/or reasonable suspicion alcohol and drug testing. Refusal to take such tests when asked may result in termination.

This application is current for only sixty (60) days. At the conclusion of this time, if you have not heard from the Company and still wish to be considered for employment it will be necessary for you to complete a new application.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_