

# G.W. SCHULTZ TOOL, INC. EMPLOYMENT APPLICATION

G.W. Schultz Tool, Inc. is a Drug-Free Workplace and an AT-WILL, EQUAL OPPORTUNITY EMPLOYER



APPLICANT INFORMATION			
Last Name		First	M.I.      Date
Street Address			Apartment #
City		State	Zip
Phone		E-mail Address	
Date Available	Social Security No.		Desired Salary
Position Applied for			
Are you able to perform any or all job functions with or without accommodation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you 18 years or older?    YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If not a U.S. citizen, are you authorized to work in the U.S.?    YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony or pled nolo contendere to a felony? (Conviction will not necessarily disqualify an applicant for employment)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references. (Do not list relatives or personal friends)</i>	
Full Name	Relationship
Company	Phone (      )
Address	
Full Name	Relationship
Company	Phone (      )
Address	
Full Name	Relationship
Company	Phone (      )
Address	

PREVIOUS EMPLOYMENT (FOR PAST 10 YEARS, START WITH MOST RECENT, INCLUDE ANY PERIODS OF UNEMPLOYMENT – USE A SEPARATE SHEET, IF NECESSARY)			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

AVAILABILITY			
Type of employment wanted	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Temp <input type="checkbox"/>
Hours Available			
Days Available to work	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>
	Thurs <input type="checkbox"/>	Fri <input type="checkbox"/>	Sat <input type="checkbox"/>
	Sun <input type="checkbox"/>	Willing to work overtime? Yes <input type="checkbox"/> No <input type="checkbox"/>	

DISCLAIMER AND SIGNATURE	
<p>The facts set forth in my application are true and complete. I authorize my former employers to furnish all information pertaining to my work record. I hereby release my former employers from all liability on account of furnishing such information. I understand that if employed, false statements, omissions or misleading statements on this application, regardless of the time they are discovered, shall be considered sufficient cause for dismissal. I also agree that my employer shall not be held liable in any respect if my employment is terminated because of such omissions or false or misleading statements. The company is hereby authorized to investigate my employment history, including contacting employers listed and to verify my education and training. I certify that my answers are true and complete to the best of my knowledge.</p>	
Signature	Date