

EMPLOYMENT HISTORY

List all jobs and activities including military service, school, part time employment while in school, self employment and periods of unemployment. Begin with the most recent. Additional pages are available at the front desk for employment history.

1	NAME OF COMPANY	FROM		STARTING	REASON FOR LEAVING (Please Explain)
		MO.	YR.	SALARY	
ADDRESS				\$	
CITY, STATE, ZIP		TO		ENDING	
		MO.	YR.	SALARY	
PHONE NO.				\$	NAME & TITLE OF IMMEDIATE SUPERVISOR
JOB TITLE AND DESCRIPTION OF DUTIES					

2	NAME OF COMPANY	FROM		STARTING	REASON FOR LEAVING (Please Explain)
		MO.	YR.	SALARY	
ADDRESS				\$	
CITY, STATE, ZIP		TO		ENDING	
		MO.	YR.	SALARY	
PHONE NO.				\$	NAME & TITLE OF IMMEDIATE SUPERVISOR
JOB TITLE AND DESCRIPTION OF DUTIES					

3	NAME OF COMPANY	FROM		STARTING	REASON FOR LEAVING (Please Explain)
		MO.	YR.	SALARY	
ADDRESS				\$	
CITY, STATE, ZIP		TO		ENDING	
		MO.	YR.	SALARY	
PHONE NO.				\$	NAME & TITLE OF IMMEDIATE SUPERVISOR
JOB TITLE AND DESCRIPTION OF DUTIES					

4	NAME OF COMPANY	FROM		STARTING	REASON FOR LEAVING (Please Explain)
		MO.	YR.	SALARY	
ADDRESS				\$	
CITY, STATE, ZIP		TO		ENDING	
		MO.	YR.	SALARY	
PHONE NO.				\$	NAME & TITLE OF IMMEDIATE SUPERVISOR
JOB TITLE AND DESCRIPTION OF DUTIES					

EDUCATION

Please indicate education or training which you believe qualifies you for the position you are seeking.

EDUCATION TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	CIRCLE LAST YEAR ATTENDED	GRADUATED	DEGREE
HIGH SCHOOL			9 10 11 12	<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE			1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
VOCATIONAL SCHOOL			1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
OTHER TRAINING			1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	

ADDITIONAL EXPERIENCE OR QUALIFICATIONS

List any other experience, skills or other qualifications including hobbies, which you believe should be considered in evaluating your qualifications for employment. Please indicate any prior military service which you would like considered in connection with your application for employment.

SKILLS

Circle the skills or abilities you have which may be applicable to the position you are seeking.

CNC MACHINES	SANDERS	ROUTERS	SCANNERS	MATCH LETTER/NUMBERS	BILINGUAL COMMUNICATION
MIG/TACK WELDING	NAIL GUNS	SKIL SAW	DATA ENTRY	MULTI-LINE PHONE	BASIC COMPUTER
DECOILERS	STAPLE GUNS	OTHER SAWS	TYPING	MATH SKILLS	MS WORD
MACHINE OPERATION	GRINDERS	PALLET JACK	FILING	SUPERVISORY SKILLS	EXCEL
SPOT WELDERS	BENDERS	HOUSEKEEPING	COUNT	WRITTEN COMMUNICATION	POWERPOINT
FORKLIFT	BANDERS	CONVEYERS	FAX, COPIER, SHREDDER	VERBAL COMMUNICATION	PHOTO SHOP
POWDER COAT	MECHANICS	ELECTRICAL	FACILITY MAINTENANCE	DETAIL ORIENTED	COMPUTER NETWORK

ATTENDANCE AND PUNCTUALITY INFORMATION

Consistent attendance and punctuality are essential requirements of every job with this company. Is there anything which would interfere with your regular attendance and punctuality if you are offered a job with the company.? YES NO

If Yes, please explain _____

BUSINESS REFERENCES

1	NAME	OCCUPATION	BUSINESS PHONE ()
	HOME ADDRESS HOME PHONE ()	TITLE	RELATIONSHIP
	CITY AND STATE (ZIP)	HOW LONG KNOWN	
2	NAME	OCCUPATION	BUSINESS PHONE ()
	HOME ADDRESS HOME PHONE ()	TITLE	RELATIONSHIP
	CITY AND STATE (ZIP)	HOW LONG KNOWN	

NOTIFICATION AND AGREEMENT

PLEASE READ BEFORE SIGNING

I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE AND COMPLETE, I UNDERSTAND THAT THE FALSIFICATION, MISREPRESENTATION OR OMISSION OF FACT ON THIS APPLICATION (OR ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS) WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN OR HOW DISCOVERED.

Questions regarding this statement should be directed to any employment interviewer before signing. The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

As an equal opportunity employer, The Hayes Company abides by applicable non-discrimination laws and will not unlawfully discriminate against any employee or applicant for employment because of race, color, age, sex, religion, national origin, ancestry, Vietnam era Veteran status, or disability.

I authorize the investigation of all statements and information contained in this application or attached resume. I release from all liability anyone supplying such information and I also release the employer from all liability that might result from making an investigation.

The Hayes Company is a Drug Free Workplace and has zero tolerance for illicit drugs and alcohol.

If I am employed by The Hayes Company, I hereby acknowledge that The Hayes Company may request a test for the detection of illicit drugs or for alcohol. I hereby consent to such a test, and authorize the laboratory that performed such sample and testing to inform The Hayes Company of the results of the test.

Employment with The Hayes Company is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

If hired, I agree to abide by the rules, regulations and policies of The Hayes Company now in force or that may be established in the future, and I agree to conduct myself in accordance with them, with full knowledge that violation may mean discipline, including discharge. I understand that employment with The Hayes Company is on an "at will" basis and my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either the company or me. I further understand that no representation, whether oral or written by any representative or agent of the Company, at any time, can constitute a contract of employment. No representative or agent of the company, has the authority to enter into any agreement for employment for any specified period of time or to make any change in any policy, procedure, benefit or other term or condition of employment other than in a document signed by the President, or to make any agreement contrary to the foregoing.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.

APPLICANT SIGNATURE _____ DATE _____