

EMPLOYMENT EXPERIENCE (last 10 years only)

Start with Your present job.

Employer	<u>Dates Employed</u> From To	Work Performed
Address	<u>Hourly Rate/Salary</u> Starting Final	
Telephone Number(s)		
Job Title Supervisor		
Reason for Leaving		
Employer	<u>Dates Employed</u> From To	Work Performed
Address	<u>Hourly Rate/Salary</u> Starting Final	
Telephone Number(s)		
Job Title Supervisor		
Reason for Leaving		
Employer	<u>Dates Employed</u> From To	Work Performed
Address	<u>Hourly Rate/Salary</u> Starting Final	
Telephone Number(s)		
Job Title Supervisor		
Reason for Leaving		

If you need additional space, please continue on separate sheet of paper.

May we contact the above listed employers? Yes No If no, specify which _____

REFERENCES We will contact those whom you list as references. We would like two professional and two personal references if possible.

Name	Address	Telephone #	Prof.	Pers.
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Have you ever been discharged or requested to resign from a position? Yes No

If yes, please explain _____

Will you work overtime whenever necessary? Yes No

If hired, do you have a way to travel to and from work? Yes No

Is there a possibility you will be moving away within the next 12 months? _____

Applicant's Signature: _____

Date: _____

PLEASE CONTINUE ON ATTACHED PAGE

APPLICANT'S CERTIFICATION AND AGREEMENT

READ CAREFULLY AND SIGN

- If I willfully falsify personnel, work or other records, including any misrepresentation of physical condition or other important facts in seeking or maintaining employment, I may be refused employment, or if employed, terminated.
- My employer is authorized to use any information in my application and/or resume to verify all statements, investigate my work, medical and personal history. I hereby release past employers, health care providers, all references and any other persons answering the company's questions concerning my ability, character, reputation and previous employment record.
- I hereby consent to submit to any test deemed necessary by the company pursuant to its investigation of my background.
- If employed, I understand that my employment may be terminated at will, either by the company or myself at any time with or without notice or cause. If terminated, the company shall be liable only for any wages, salary or benefits that I have earned up to and including the date of termination. I further agree that the company may modify the employment relationship at any time with or without notice or cause. If employed, I agree that my employment is not for any specified time, and that only the President of the company is authorized to enter into any agreements or assurance contrary to this policy, and any such agreement must be in writing.
- In consideration of my employment, I agree to observe all present and future company rules and policies.
- I hereby consent to medical or drug/alcohol testing, including, but not limited to, a urine test and/or blood test and I authorize the release and disclosure of the results of any such test to the company for its use and internal communication. I release and fully discharge the company and doctor(s), laboratory or facility that performs any such tests for the disclosure of such information to my employer.
- I understand that the needs of the company may require that I work overtime, shift work, or rotating schedules, which are not limited to a Monday through Friday schedule.
- I understand that the company is an **equal opportunity employer** and that in filling vacant positions the company will select the best qualified applicant available without regard to race, color, religion, sex, age, national origin, handicap or veteran status. I further understand that the company does not discriminate in employment and that no statements or information provided in my application will be used to limit or exclude my consideration for employment in violation of any local, state or federal law.
- I understand that I am applying for employment at SL America Corporation, which requires high personal and professional standards. I certify that I have read, understood, and agree to the above statements and that all information given by me in my employment application is true and complete in all respects, and I agree that if employed and it is found that any information is false or misleading in any way, I may be subject to termination without notice.

Signature _____

Date _____