

# APPLICATION FOR EMPLOYMENT

## APPLICATIONS NOT FILLED OUT COMPLETELY WILL BE REJECTED

This Company is an equal opportunity employer. No question on this application is asked for the purpose of excluding any applicant's consideration for employment because of race, color, religion, sex, age, national origin, sexual orientation, veteran's status, disability, or any other characteristic protected under state or federal law. ANY APPLICANT WILL BE IMMEDIATELY REJECTED FOR EMPLOYMENT OR, IF HIRED, TERMINATED WITHOUT NOTICE FOR GIVING FALSE INFORMATION IN THIS APPLICATION OR FAILING TO ACCURATELY PROVIDE INFORMATION REQUESTED. IF HIRED, EMPLOYMENT IS FOR NO FIXED TERM AND THE COMPANY OR THE EMPLOYEE CAN TERMINATE EMPLOYMENT AT ANY TIME.

### GENERAL INFORMATION:

1. Full Name \_\_\_\_\_  
(Last) (First) (Middle)

List all other names you have worked under or are known by: \_\_\_\_\_

2. Address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
(No.) (Street) (City) (State) (Zip)

E-mail address \_\_\_\_\_

Mailing address, if different \_\_\_\_\_

How long have you been a resident of the city in which you reside? \_\_\_\_\_

Last previous address \_\_\_\_\_  
(No.) (Street) (City) (State) (Zip)

3. If hired, can you furnish proof of age? Yes  No  (An offer of employment, if made, will be subject to verification that applicant's age meets legal requirements.)

4. For what position are you applying? (Note: Applications for "any" job will not be considered. You must list specific job(s) and limit your interest to no more than three.)

1st choice: \_\_\_\_\_ 2nd choice: \_\_\_\_\_ 3rd choice: \_\_\_\_\_

5. Are you computer skilled? Yes  No  List computer programs with which you are familiar: \_\_\_\_\_

6. Do you have any work-related military experience in a federal or state unit? Yes  No

If "yes" please explain: \_\_\_\_\_

7. Are you now working more than one job at a time? Yes  No  If "yes" please explain: \_\_\_\_\_

8. Have you ever been an employee of this company under your own name or another name? Yes  No

If "yes" please give name: \_\_\_\_\_

9. Have you ever been discharged or asked to resign? Yes  No  If "yes" please explain: \_\_\_\_\_

10. Do you have a means for getting to work regularly? Yes  No

11. If an offer of employment is made, and prior to your commencement of employment duties, you may be required to undergo a medical examination and/or a drug test, the results of which may affect the offer of employment. Are you willing to undergo such an examination? Yes  No

**12. EMPLOYMENT HISTORY: MUST BE DETAILED AND ACCURATE TO AVOID DISQUALIFICATION**

Give last five employers in chronological order. Do not make any omissions.

<p>1. Name of last Employer: _____ Telephone No. _____ Address: _____ Name of immediate supervisor: _____ From: _____ To: _____ Position: _____ Pay \$: _____ Reason for leaving : _____ _____</p> <p>If you are currently employed with this employer, may we contact them?    Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>2. Name of next Previous Employer: _____ Telephone No. _____ Address: _____ Name of immediate supervisor: _____ From: _____ To: _____ Position: _____ Pay \$: _____ Reason for leaving : _____ _____</p>
<p>3. Name of next Previous Employer: _____ Telephone No. _____ Address: _____ Name of immediate supervisor: _____ From: _____ To: _____ Position: _____ Pay \$: _____ Reason for leaving : _____ _____</p>
<p>4. Name of next Previous Employer: _____ Telephone No. _____ Address: _____ Name of immediate supervisor: _____ From: _____ To: _____ Position: _____ Pay \$: _____ Reason for leaving : _____ _____</p>
<p>5. Name of next Previous Employer: _____ Telephone No. _____ Address: _____ Name of immediate supervisor: _____ From: _____ To: _____ Position: _____ Pay \$: _____ Reason for leaving : _____ _____</p>

**13. Have you ever been convicted of a crime under your own or another name?**

(Do not include traffic tickets.)    Yes  No

If "yes" state crime: \_\_\_\_\_ Date: \_\_\_\_\_ Charge: \_\_\_\_\_

Court (justice, muni, etc.) \_\_\_\_\_ Location: \_\_\_\_\_

Disposition of case: \_\_\_\_\_

If "yes" state crime: \_\_\_\_\_ Date: \_\_\_\_\_ Charge: \_\_\_\_\_

Court (justice, muni, etc.) \_\_\_\_\_ Location: \_\_\_\_\_

Disposition of case: \_\_\_\_\_

**(Note: Conviction of a crime or crimes will not necessarily disqualify you from employment.)**

14. North Sails manufacturing operates 24 hours a day, seven days a week. If you are applying for a position in manufacturing or production, can you work any shift or day of the week? Yes  No

15. What shifts can you work?

Days (6am – 2:15pm)  Swing (2pm-10:15pm)  Graveyard (10pm-6:15am)

16. Preferred shift choice?

Days (6am – 2:15pm)  Swing (2pm-10:15pm)  Graveyard (10pm-6:15am)

17. Can you work weekends as part of your regular schedule? Yes  No

18. Are you looking for a Full-Time  or Part-Time  position?

19. Have you read the position overview and qualifications for the position you are applying? Yes  No

Can you perform all the job related tasks for the position? Yes  No

20. Please describe your skills and qualities that pertain to the position you are applying.

21. Tell us why North Sails should consider hiring you.

**22. Education**

School	Name of School	Graduated		Date Left	Major/Minor Courses Taken	Degree
		Yes	No			
<input type="checkbox"/> High School				X		
<input type="checkbox"/> College						
<input type="checkbox"/> Graduate Work						
<input type="checkbox"/> Trade or Business						
<input type="checkbox"/> Correspondence						

23. What prompted your application?    Employment agency     Own accord     Advertisement   
 Employee referral:     Other  \_\_\_\_\_  
 Name of employee who referred you: \_\_\_\_\_

**AFFIDAVIT - PLEASE READ CAREFULLY**

I have truthfully disclosed all information asked for in this application.

I authorize contact with any person or entity named in this application and any other person or entity who may have knowledge concerning my past for the purpose of obtaining information material to my qualifications and suitability for employment, unless otherwise noted.

I authorize all of those with whom I am acquainted - previous employers, professionals, institutions, neighbors, friends, agencies asked to provide criminal conviction history and others - to furnish any and all information they may have concerning me which may be material to my qualifications and suitability for the job for which I have applied.

**Since all employees are hired for an indefinite and unspecified duration, none of these classifications guarantees employment for any specific length of time. I understand that nothing in this application is intended to imply or create an employment relationship or contract of employment. Employment is at the mutual consent of the employee and the company. Accordingly, either the employee or the company can terminate the employment relationship at will, at any time, with or without cause or advance notice. Furthermore, no employee or representative of the company, other than the President, has any power or legal authority to alter the at-will nature of the employment relationship. The President can alter the nature of the relationship only if he expressly does so in a written agreement that is signed both by the President and the employee involved. This represents an integrated agreement with respect to the at-will nature of the employment relationship.**

*ATTENTION APPLICANT: This application will be kept under active consideration for no more than 30 days from the date of application as shown below.*

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

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Signature of employer representative)

**FOR INTERVIEWER USE ONLY**

Interviewed: Date & Time: \_\_\_\_\_ Interviewer: \_\_\_\_\_  
 Employment offered?     Yes  No    Offer Conditioned?     Yes  No  
 Offer accepted?         Yes  No    If offer conditioned, describe: \_\_\_\_\_

Comments: \_\_\_\_\_

Job classification: \_\_\_\_\_

Approved by: \_\_\_\_\_ Starting pay: \$ \_\_\_\_\_ per \_\_\_\_\_

Date: \_\_\_\_\_ Department: \_\_\_\_\_ Shift or Assignment: \_\_\_\_\_