



# Application for Employment

\*An Equal Opportunity Employer

## PERSONAL DATA

Last Name	First	Middle Initial
Home Address Street		Permanent Address (leave blank if same as home address) Street
City	State	ZIP
Telephone Number ( )		Telephone Number ( )

## EMPLOYMENT INFORMATION

Position(s) Applied For: \_\_\_\_\_ Salary Desired \$ \_\_\_\_\_ Per \_\_\_\_\_

Social Security # \_\_\_\_\_ Are you 18 years of age or over?  Yes  No  
 If not, what is your age? \_\_\_\_\_  
 You must provide proof of your eligibility to work.

Are you legally authorized to work in the United States?  Yes  No

Have you ever been employed by  or previously applied to Jexal's or any of its subsidiaries? If so, please specify location(s) and date(s).  
 \_\_\_\_\_

How were you referred to Jexal's?  
 \_\_\_\_\_

Can you carry 50 pounds a distance of 50 feet with or without a reasonable accommodation?  Yes  No

The following conditions may be required as part of a job assignment. If required, would you be willing to work:

A. Shift work?  Yes  No      B. Rotational work schedule?  Yes  No

C. Work schedule other than Monday thru Friday?  Yes  No      D. Overtime work  Yes  No

When could you be available to begin work?  
 \_\_\_\_\_

Type of employment desired:  Regular  Part-Time  Temporary  Summer  Cooperative Education

When can you work? **Days of Week AND Times**

D.O.W.	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<b>Times</b>							

## SECURITY DATA

Have you ever been convicted of a felony?  Yes  No

If yes, please briefly describe the circumstances of your conviction, indicating the date, nature, and place of the offense and disposition of the case. A conviction will not necessarily disqualify an applicant from employment since this will be looked upon as only one of the factors considered in the employment decision and is evaluated in terms of the nature, severity, and date of the offense.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**EDUCATION AND TRAINING**

Type of School	Name & Address of School	Graduated		Type of Degree Diploma or Certificate	Major/Minor Field of Study
		Yes	No		
High School					
College or University					
Other Education					

**EMPLOYMENT EXPERIENCE**

Please list your last four employers. Start with your present status and note any periods in which you were not employed. Include U.S. military service, previous the Company experience, summer/part-time jobs, and cooperative education assignments.

Company Name and Address	Dates Employed		Base Rate of Pay		Position Title and Description of Duties	Reason for Leaving
	Month	Year	Starting \$	Per		
	From		Starting \$	Per		
	To		Final \$	Per		
Telephone ( )						
	From		Starting \$	Per		
	To		Final \$	Per		
Telephone ( )						
	From		Starting \$	Per		
	To		Final \$	Per		
Telephone ( )						

**Do you have any objections to our contacting your present employer to verify the above?**     No, you may contact anytime.  
 Do not contact now, you may contact at a later date. Please specify:     Contact after acceptance of offer     Other \_\_\_\_\_

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY**

1. The information that I have provided on this application is accurate to the best of my knowledge and subject to verification by the Company.
2. I authorize the persons, schools, current employer (if approved by me in Employment Experience section) and other organizations or employers named in this application to provide the Company with any relevant information or school transcript information that may be required to make an employment decision.
3. I understand and agree that:
  - a. Any misrepresentation or omission of a fact in my application may be justification for refusal of, or if employed, termination from employment.
  - b. Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, shift work, a rotating work schedule, or a work schedule other than Monday through Friday. I understand and accept these conditions of my continuing employment.
  - c. If my application for employment is accepted, the effective date of my employment shall be the time I actually begin to work. If I am employed, I agree to comply with, and be bound by, the safety and health rules and regulations, and rules of conduct of the Company together with the obligations set forth in the Company's Non-Compete /Non-Disclosure Agreement, if applicable.
  - d. I understand that nothing contained in this application, or in granting an interview is intended to create a contract for either employment or the providing of any benefit. If employed by the Company, I understand that my employment is at will, and is not guaranteed for any term; my employment may be terminated by the Company or myself at any time, or for any reason with or without cause or notice. Only the Chief Executive Officer of the Company is authorized to make a promise of continuing employment or employment for a specified term and any such agreement may be made only in writing and cannot be made orally.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

*This application Will Receive Active Consideration for Thirty Days.*

**\*The Company does not discriminate in hiring or employment on the basis of race, color, religion, national origin, sex, age, disability or veteran status. No question on this application is intended to secure information to be used for such discrimination.**