MELROSE METALWORKS

EMPLOYMENT APPLICATION

Full Name _____

Address_____

City _____ State _____ Zip_____

Phone: _____ Email:_____

Are you 18 or older? ☐ Yes ☐ No Position Applied For_____

Desired Wage or Salary MUST BE COMPLETED_____

Date available to start work _____ Are you willing to work 2nd shift? ☐ Yes ☐ No

Are you a U.S. citizen? ☐ Yes ☐ No If no, do you have work papers? ☐ Yes ☐ No

Are you able to lift up to 70 lbs? ☐ Yes ☐ No

Do you have a clean, valid driver's license? ☐ Yes ☐ No

Summarize your special skills or qualifications_____

_____

_____

Education:

Name of **High School** _____

Did you Graduate? ☐ Yes ☐ No If no, did you obtain a GED? ☐ Yes ☐ No

Name of **College/Trade School** _____

Did you Graduate? ☐ Yes ☐ No Degree or Certificate _____

Previous Employment: (begin with most recent job):

Employer_____

City_____ **Phone Number**_____

Name of Supervisor _____

Dates of Employment_____

Position(s) Held_____

Tasks you performed _____

Reason for leaving _____

May we contact this employer? ☐ Yes ☐ No If No, why not? _____

Employer_____

City_____ **Phone Number**_____

Name of Supervisor _____

Dates of Employment_____

Position(s) Held_____

Tasks you performed _____

Reason for leaving _____

May we contact this employer? ☐ Yes ☐ No If No, why not? _____

Employer_____

City_____ **Phone Number**_____

Name of Supervisor _____

Dates of Employment_____

Position(s) Held_____

Tasks you performed _____

Reason for leaving _____

May we contact this employer? ☐ Yes ☐ No If No, why not? _____

References:
Please provide the name and contact information for three people who can provide a character reference; do not list relatives or previous employers.

Name _____

Address _____

Phone No. _____

Name _____

Address _____

Phone No. _____

Name _____

Address _____

Phone No. _____

How did you hear about Melrose Metalworks? _____

I certify that the information I have provided herein is true and complete to the best of my knowledge.

I authorize Melrose Metalworks to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

_____ _____
Signature of Applicant Date

For Department Use Only:
Date Received Application:_____

Interview setup:_____Date:_____