

In accordance with state and federal laws, employment offers are tendered solely on the basis of qualifications without regard to race, religion, color, national origin, age, sex, marital status, sexual orientation, handicap (including disabled veterans) or Vietnam Era veteran status. If hired, this application will be a part of your employment record. Ink is required to complete the application form, answering all items completely and accurately, using "no", "none", or "not applicable" as appropriate. Inquiries beyond normal reference checking may be made during the processing of this application concerning pertinent information about you. We will give this application consideration, however, in accepting it, Vanwin makes no commitment of employment to the applicant.

Vanwin requires post-offer, pre-employment drug testing as a condition of employment. After successfully completing the drug testing, applicants may be required to complete a base line hearing test and/or a respirator fitness test as requirements for the job. Vanwin requires proof of employability.

## PLEASE PRINT OR TYPE ALL INFORMATION. ALL QUESTIONS MUST BE ANSWERED.

## **GENERAL INFORMATION**

Position Applied For:					
Name:					
Last	First		Middle		
Address:					
Street	City, State		Zip		
Telephone:()	Social So	ecurity N	umber:		
Emergency Contact:		Tele	ephone:		
Are you 18 years of age or older?	_	yes	no		
Are you currently employed?		yes	no		
May we contact your present empl	oyer?	yes	no		
Are you available to work overtim	e?	yes	no		
Are you willing to travel?		_yes	no		
Are you able to perform essential j	ob functions?				
with or without reasonable accomm	nodation?	_yes	no		
Can you meet attendance requirem	ents?	yes	no		
Have you ever been convicted of a	misdemeanor?				
Answering yes will not necessarily	v disqualify an				
applicant from employment.)		yes	no		
If yes, please					
explain:					
Have you ever been convicted of a	felony?				
(Answering yes will not necessaril	y disqualify an				
applicant from employment.)	_	yes	no		
If yes, please					
explain:					

On what date would you be available for work?

## NOTICE TO

## **EMPLOYMENT APPLICANTS**

WE ARE CONCERNED ABOUT THE EFFECT OF THE USE OF ILLEGAL DRUGS AND THE HEALTH AND SAFETY OF OUR EMPLOYEES. WE RECOGNIZE THAT ALCOHOL AND ILLEGAL DRUGS INCREASE THE RATIO OF ACCIDENTS AND MEDICAL CLAIMS IN THE WORKPLACE. EMPLOYEES WHO ABUSE DRUGS AND ALCOHOL ARE NOT ONLY A DANGER TO THEMSELVES, BUT TO CO-WORKERS AS WELL.

IN ADDITION, THE INCREASED MEDICAL COST INCURRED BY EMPLOYEES WITH DRUG AND ALCOHOL PROBLEMS ARE MUCH HIGHER THAN THOSE OF OTHER EMPLOYEES, AND THE DECREASED PRODUCTIVITY OF THE INDIVIDUALS, BECAUSE OF ABSENTEEISM AND TURNOVER, CAN ADVERSELY AFFECT A COMPANY'S ABILITY TO CONTINUE TO COMPETE AND THEREFORE SURVIVE.

> APPLICANTS FOR EMPLOYMENT WILL BE REQUIRED TO UNDERGO POST-OFFER, PRE-EMPLOYMENT DRUG TESTING

# **EMPLOYMENT HISTORY**

## Start with your present employer. Your present employer will not be contacted without your specific permission.

EMPLOYER	DATES EMPLOYED		LIST JOB DUTIES
	FROM	ТО	
ADDRESS			
TELEPHONE NUMBER(S)	HOURLY RATE / SALARY		
	STARTING	FINAL	
JOB TITLE SUPERVISOR			
REASON FOR LEAVING			

EMPLOYER	DATES EMPLOYED		LIST JOB DUTIES
	FROM	ТО	
ADDRESS			
TELEPHONE NUMBER(S)	HOURLY RATE / SALARY		
	STARTING	FINAL	
JOB TITLE SUPERVISOR			
REASON FOR LEAVING			

EMPLOYER	DATES EMPLOYED		LIST JOB DUTIES
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EMPLOYER	DATES EMPLOYED		LIST JOB DUTIES
	FROM	ТО	
ADDRESS			
TELEPHONE NUMBER(S)	HOURLY RATE / SALARY		
	STARTING	FINAL	
JOB TITLE SUPERVISOR			
REASON FOR LEAVING			

# **EDUCATION**

Type of School	Name and Location	Course of Study	No. of years completed	Did you graduate	Degree or Diploma
Graduate					
College					
Business/Trade					
High School					
Elementary					

# SPECIAL SKILLS AND QUALIFICATIONS

Summarize skills and qualifications that are relevant to the position you are applying.

# REFERENCES

List three individuals with whom you have worked for/with in a professional surrounding.

	<u>Name/Title</u>	Company/Address	<b>Telephone</b>
1			
2			
3			

## **RELEASE AND CERTIFICATION**

## Must be read and signed by all applicants.

- 1. I understand that the application will be verified for employment.
- 2. I hereby authorize any employer, company or other person to furnish VANWIN full and complete information concerning my ability, character, work record, and any other lawful information desired, and specifically release any such employer, company or person from liability because they supplied such information. This does not take into account the ability to keep your current employer from being contacted.
- 3. I understand any offer of employment is made contingent upon passing any and all of the test(s) required by VANWIN for the job in which I am applying for, and a satisfactory background report, as outlined in paragraph 2 above.
- 4. I agree that just as I have, if hired, the right to terminate my employment at any time with or without cause and with or without notice, VANWIN may terminate my employment at any time, with or without cause or notice. I understand that no manager or representative of VANWIN, other that its president or his designee, has any authority to enter into any agreement for employment for any specified period of time or make any agreement contrary to the foregoing either now, in the past, or in the future. I further understand that such an agreement must be in writing and signed by an authorized person of VANWIN for it to be binding on either VANWIN or myself. I further understand that this statement supersedes any prior oral or written understanding and bars any future oral understanding to the contrary.
- 5. I understand that this application in no way obligates VANWIN to hire me.
- 6. If employed, I agree to abide by all rules, regulations and policies of VANWIN.
- 7. I agree to disclose any non-competition agreement I may be bound to by a previous employer.
- 8. I declare that the information provided by me is complete and true to the best of my knowledge. I understand that any misrepresentation or omission on this application may prevent an offer of employment, or may result in a withdrawal of an employment offer, or may result in my discharge from employment if I am already employed at the time the misrepresentation or omission is discovered.

Applicant's Signature	Date
<b>OFFICE USE ONLY, DO NOT WRITE O</b>	R TYPE BELOW THIS SPACE
Position Offered:	
Starting Date:	
Offered by:	
Starting Salary:	