

Employment Application

We are an Equal Opportunity Employer

BAY VERTE MACHINERY, INC. • 975 PARKVIEW RD. • GREEN BAY, WI 54304

Please type or print in ink, you must complete entire	иррисшион	Date:
APPLICANT INFORMATION		
Name (first, middle, last)		
1 (1115), 111550, 11150)		
		D m.1.1
Address (street, city, state, zip code)		Day Telephone
Social Security #		Evening Telephone
List other names under which you have worked or a	ttended school? (reference checking j	ourposes)
·		
Are you legally authorized to work in the U.S.?		□ YES □ NO
If hired, you will be required to provide proof of work authorization.		
		VEG NO
Are you at least 18 years old?		\square YES \square NO
If not, your employment will be subject to verification that you meet		
requirements for the type of work you are applying for and have obtain		
Have you ever been convicted of a crime or pleaded	no contest for any offense	\square YES \square NO
or violation other than minor traffic violations?		
If yes, explain 1) nature of crime, 2) date of conviction, and 3) sate in	which convicted. (Convictions are	
not an automatic bar on employment.)	(
1 3		
Do you have any pending criminal charges against y	7011 ⁹	□ YES □ NO
		d IES d NO
If yes, describe the 1) nature of the charges, 2) date issued, and	1 3) county and state where issued.	
	T	
Have you ever applied at this company before?	Have you ever worked at this con	± •
\square YES \square NO	\square YES \square NO If ye	es, when?
POSITION DESIRED Desire PT or FT	Salary Preference	Shift Preference
When could you start?		
When could you start? How were you referred to the company?	☐ Agency ☐ Friend/Rel	ative
How were you referred to the company?	☐ Agency ☐ Friend/Rel☐ Walk-In ☐ School	ative
How were you referred to the company?	□ Walk-In □ School	ative
How were you referred to the company?		ative
How were you referred to the company? SPECIAL SKILLS	□ Walk-In □ School □ Newspaper □ Other	
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How were you referred to the company? SPECIAL SKILLS 1. If relevant, please describe word processing	Walk-In	fice equipment experience.
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		,	Years Attended			Degree	
High							YES NO
						Type:	NO
College							YES NO
						Type:	
Graduate							YES
						Type:	NO
Other							YES NO
(specify)						Type:	
TRAINI	NG						
List any re	elevant trai	ning programs completed.					
Course/Se		Owner-instination Commencering	A		I		
Course/se	eminar	Organization Sponsoring	Content		Dat	e(s) Att	ended
Course/se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
Course/se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
Course/Se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
Course/Se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
Course/Se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
Course/Se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
Course/Se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
Course/Se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
Course/Se	eminar	Organization sponsoring	Content		Dat	e(s) Att	ended
			Content		Dat	e(s) Att	ended
REQUIR	RED LIC	ENSING		r.	Dat	e(s) Att	ended
REQUIR If required	RED LIC	ENSING motor vehicle for the job applying		r: 2) state issued:		e(s) Att	ended
REQUIR If required 1) Driv Are you lice	RED LICI to drive a reer's license	ENSING notor vehicle for the job applying number: any group, association or society	g for, state you	2) state issued:	ou are applying	y??	ended
REQUIR If required 1) Driv Are you lice	RED LICI to drive a reer's license	ENSING notor vehicle for the job applying number:	g for, state you	2) state issued:		y??	ended

No. of

Major subjects

Diploma or

Name and Location (city, state)

School

EMPLOYMENT HISTORY (most	recent first; attach additional sheet if necessary)
Name of Employer	Telephone
Address	
Job Title	Employment Dates (month and year)
Name of Immediate Supervisor	From To
Description of Duties	
Salary – start Salary	end Reason for Leaving
If currently employed, may we contact as a	a reference:
Name of Employer	Telephone
Address	
Job Title	Employment Dates (month and year)
Name of Immediate Supervisor	From To
Description of Duties	
Salary – start Salary –	end Reason for Leaving
	I
Name of Employer	Telephone
Name of Employer Address	Telephone
	Telephone Employment Dates (month and year)
Address	
Address Job Title	Employment Dates (month and year)
Address Job Title Name of Immediate Supervisor	Employment Dates (month and year) From To
Address Job Title Name of Immediate Supervisor Description of Duties Salary – start Salary –	Employment Dates (month and year) From To Reason for Leaving
Address Job Title Name of Immediate Supervisor Description of Duties	Employment Dates (month and year) From To
Address Job Title Name of Immediate Supervisor Description of Duties Salary – start Salary – Name of Employer	Employment Dates (month and year) From To Reason for Leaving
Address Job Title Name of Immediate Supervisor Description of Duties Salary – start Salary – Name of Employer Address	Employment Dates (month and year) From To Reason for Leaving Telephone
Address Job Title Name of Immediate Supervisor Description of Duties Salary – start Salary – Name of Employer Address Job Title	Employment Dates (month and year) From To Reason for Leaving Telephone Employment Dates (month and year)
Address Job Title Name of Immediate Supervisor Description of Duties Salary – start Salary – Name of Employer Address Job Title Name of Immediate Supervisor	Employment Dates (month and year) From To Reason for Leaving Telephone Employment Dates (month and year) From To

EMPL	OYMENT REFERENCES		
List indiv	viduals familiar with your job qualifications (no re	latives or personal friends).	
Name		Day Telephone	
		Evening Telephone	
Address			
Relations	ship	Known how long?	
Name		Day Telephone	
		Evening Telephone	
Address			
Relationship		Known how long?	
Name		Day Telephone	
		Evening Telephone	
Address		,	
Relations	ship	Known how long?	
	Discour Dead Constalled De	Constitution of the second	
	Please Read Carefully Be	fore Signing This Form	
1.		ue and correct to the best of my knowledge and belief. I any kind may result in denial of employment or be cause for	
2.	I authorize the company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.		
3.	I understand that upon receiving a job offer, a physical examination and drug screening may be required (Note: if this is a job requirement, you will be notified.)		
4.	Regardless of whether or not I become employed by the company, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at will basis and that my employment may be terminated with or without cause, and without notice, at any time, a my option or the company's, unless specifically provided otherwise in a written employment contract. I furthe understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed, written document.		
Signed by	y Applicant	Date	