



## APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered without regard to race, color, religion, sex, national origin, age, marital status or disability.

**APPLICATION MUST BE COMPLETED IN ITS ENTIRETY BEFORE YOU WILL BE CONSIDERED FOR ANY POSITION.**

**Name** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Last                      First                      Middle

**Address** \_\_\_\_\_  
Street                      City                      State                      Zip Code

**Telephone #** ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_ **Alternate #** : ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

**Are you 18 years of age or older:**    **YES**   **NO**                      **Are you legally entitled to work in the United States?**   **YES**   **NO**

**Have you ever been convicted of a felony or misdemeanor (other than minor traffic violations)?**    **YES**   **NO**

**IF ANSWER IS YES; WHEN, WHERE AND FOR WHAT OFFENSE WERE YOU CONVICTED?**

---

A conviction will not necessarily be a bar to employment. Factors such as date, nature and number of offenses, age at the time of offense and rehabilitation will be considered.

**EMPLOYMENT DESIRED \*Applications with "Any" or "Anything" Available will NOT be considered for employment\***

<b>Specific Position (s):</b>	<b>Date you can start:</b>	<b>Compensation Desired:</b>
<b>Are you employed now?</b>	<b>May we contact your employer?</b>	<b>Are you applying for Full or Part Time?</b>
<b>Have you previously been employed by Millat Industries?</b>	<b>If previously employed by Millat Industries, when and where?</b>	<b>Referred by?</b>

<b>EDUCATION</b>	<b>Name/Location of School</b>	<b>No. Years Attended</b>	<b>Did you graduate?</b>	<b>Subjects Studied/Degree</b>
<b>Grammar School</b>				
<b>High School</b>				
<b>College</b>				
<b>Trade, Business or Correspondence School</b>				

**\*All areas must be complete in every section to be considered for employment\***

**U.S. MILITARY SERVICE**

<b>Branch of Service:</b>		<b>Rank:</b>
<b>Date Entered:</b>	<b>Date Separated:</b>	
<b>Training/Experience Received:</b>		

**WORK HISTORY**

*\*Please complete the entire work history section even if you are attaching your resume.\**

<b>Current or last Employer:</b>		<b>Employer Address:</b>	
<b>Job Title:</b>	<b>Supervisors Name:</b>	<b>Telephone Number:</b>	<b>May we contact?</b>
<b>Date Employed</b> From            To	<b>Starting Salary</b> \$            per	<b>Ending or Current Salary</b> \$            per	<b>If part time the number of hours worked per week:</b>
<b>Reason for leaving: circle one: Discharge    Quit    Lay-off</b> <b>Explain:</b>			
<b>List major duties in order of their importance in the job</b>			

<b>Employer:</b>		<b>Employer Address:</b>	
<b>Job Title:</b>	<b>Supervisors Name:</b>	<b>Telephone Number:</b>	<b>May we contact?</b>
<b>Date Employed</b> From            To	<b>Starting Salary</b> \$            per	<b>Ending or Current Salary</b> \$            per	<b>If part time the number of hours worked per week:</b>
<b>Reason for leaving: circle one: Discharge    Quit    Lay-off</b> <b>Explain:</b>			
<b>List major duties in order of their importance in the job</b>			

<b>Employer:</b>		<b>Employer Address:</b>	
<b>Job Title:</b>	<b>Supervisors Name:</b>	<b>Telephone Number:</b>	<b>May we contact?</b>
<b>Date Employed</b> From            To	<b>Starting Salary</b> \$            per	<b>Ending or Current Salary</b> \$            per	<b>If part time the number of hours worked per week:</b>
<b>Reason for leaving: circle one: Discharge    Quit    Lay-off</b> <b>Explain:</b>			
<b>List major duties in order of their importance in the job</b>			

**\*All areas must be complete in every section to be considered for employment\***

**References**

NAME	ADDRESS/TELEPHONE	POSITION/BUSINESS	YEARS ACQUAINTED

**PLEASE LIST MACHINE EXPERIENCE:**

Type of Machine:	Control:	No. of years experience:	Type of Machine:	Control:	No. of years experience:

Please list the names of any relatives currently or previously employed here: \_\_\_\_\_

\*I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed; any incomplete, false or misleading statements on this application shall be grounds for dismissal at any time in the future.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I also authorize you to obtain information regarding my record from the Bureau of Motor Vehicles if the job for which I am applying will require driving as part of my job duties.

I understand that pursuant to Millat Industries job application process I may be required to undergo drug testing for pre-employment, reasonable suspicion and random testing. I further understand that if I refuse to take or fail the drug test, I am disqualified from further employment consideration. I hereby knowingly and voluntarily consent to Millat Industries request to undergo drug testing. I understand that in the event I am injured while in the employment of Millat Industries, I will be required to undergo drug and/or alcohol testing at the time medical attention is given, and I authorize the release of the test results to Millat Industries without further notice or consent by me. I release Millat Industries and the medical providers from all claims arising out of the testing and release of the information. I understand that my refusal to undergo drug and/or alcohol testing will result in my immediate termination. I further release Millat Industries and its officers, agents, representatives and employees from any and all claims for liability for damages associated with or arising from my submission to the test. Additionally, a post-offer employment physical will be given. By signing this application I acknowledge and give my consent to a pre-offer drug screen and a post offer physical.

I agree that any claim or lawsuit relating to my service with Millat Industries, or any of its subsidiaries, must be filed no more than six months after the date of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

In consideration of my employment, I agree to conform to Millat Industries rules, regulations and policies, and agree that my employment and compensation can be terminated with or without cause, and with or without notice at any time, for any reason, at the option of either Millat Industries or myself. I understand that no supervisor, manager, officer or representative of Millat Industries cannot enter into any agreement for employment for any specified period of time or to make any agreement contract to the foregoing other than the president and then only in writing. I understand that no promise of a benefit is binding unless made in writing and signed by the president of the company.

**Read, Understood, and Agreed.**

**DATE:** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_