



SCHILTZ CRANE INC. EMPLOYMENT APPLICATION

Personal Information

First Name: _____ Last Name _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Social Security Number: _____ Driver's License Number: _____

Email Address: _____

- If hired, can you provide proof that you are legally able to work in the US? Yes _____ No _____
- How were you referred to us?
Advertisement ___ **Referral** ___ **Employment Agency** ___ **Walk-In** ___ **Other** ___

- Have you ever been convicted of a criminal offence (felony or misdemeanor)?
Note: An affirmative answer will not necessarily result in disqualification for employment
Yes _____ **No** _____

If yes, please state the nature of offense(s), date(s), city, state, and disposition of the offense(s)

- List any relatives or friends employed by Schiltz Crane Inc.

Employment

- Position Desired: _____

- Salary Desired:

- What days and hours are you available for work?

- Are you available to work overtime if necessary? **Yes** _____ **No** _____
- Are you over 18 years of age? **Yes** _____ **No** _____
- If you are under the age of 18, can you provide a work permit? **Yes** _____ **No** _____

- When are you available to begin work? _____
- Are you able to perform the essential functions of the job for which you are applying?
Yes _____ **No** _____

Note: We comply with the Americans with Disabilities Act and will consider reasonable accommodation measures that may be necessary for eligible applicants to perform essential functions.

Skills

- Are you able to operate a personal computer? **Yes** _____ **No** _____
 If yes, what types of computer software do you have proficiency in?

- What knowledge or special skills do you have which especially prepare you for the position applied for?

Education

- **High School or Trade School**
 Name & City of School: _____
 Number of Years Completed _____
 Did you graduate? **Yes** _____ **No** _____
- **College**
 Name & City of School: _____
 Number of Years Completed _____
 Did you graduate? **Yes** _____ **No** _____
 Degree(s) _____

Employment History

Please account for all employment within the last 7 years, beginning with your current or most recent employer:

(1) Company Name & Address:

Supervisor Name & Phone Number:

Job Title: _____ **Starting Salary:** _____ **Ending Salary:** _____

Dates of Employment: _____

Specific Job Duties: _____

May we contact this employer? Yes _____ No _____

Reason for Leaving: _____

(2) Company Name & Address:

Supervisor Name & Phone Number:

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Dates of Employment: _____

Specific Job Duties: _____

May we contact this employer? Yes _____ No _____

Reason for Leaving: _____

(3) Company Name & Address:

Supervisor Name & Phone Number:

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Dates of Employment: _____

Specific Job Duties: _____

May we contact this employer? Yes _____ No _____

Reason for Leaving: _____

Personal References

Please list at least 2 persons NOT related to you who have known you for at least five years

- Name _____
Address _____
Phone number: _____
- Name _____
Address _____
Phone number: _____

APPLICANT'S STATEMENT

(Initial each numbered item as reading)

1. _____ The information that I have provided on this application is accurate to the best of my knowledge and may be verified by Schiltz Crane Inc or its agents.
2. _____ I authorize all the schools, persons and organizations named in this application to provide any relevant information in their possession or knowledge to the agent of Schiltz Crane Inc, for use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release Schiltz Crane Inc, my former employers, and all other persons from any and all claims, demands or liabilities arising out of or in any way related to such inquiry or disclosure.
3. _____ I understand that Schiltz Crane Inc, is committed to maintaining a drug and alcohol-free workplace. Accordingly, I may be subject to pre-employment blood test, urinalysis, or other drug /alcohol screenings. I further understand that if employed, I may be subject to such a drug and alcohol screening if Schiltz Crane Inc, has reasonable suspicion to believe that I am under the influence of a drug or alcohol. My consent to submit to such a test is required as a condition of employment and my refusal to consent shall result in a refusal to hire or, if already employed terminated.
4. _____ I understand and agree that any misrepresentation or omission of facts in this application will be justification for refusal or termination of employment, regardless of the time elapsed before discovery.
5. _____ I understand and agree that the employment for which I am applying for is at-will and such employment may be terminated at any time with or without cause, without prior notice, by either myself or Schiltz Crane Inc. There will be no agreement, expressed or implied between Schiltz Crane Inc and me for any specific period of employment, nor for continuing or long-term employment, unless made in writing, signed by an authorized representative of Schiltz Crane Inc.
6. _____ I have placed my signature in the space provided below only after I have completed the entire application to the best of my ability and have carefully read the statements above.

Applicant Name: _____

Applicant Signature: _____

Date: _____