



APPLICANT INFORMATION											
Last Name				First				M.I.		Date	
Street Address						Apartment/Unit #					
City				State				ZIP			
Phone				E-mail Address							
Date Available				Social Security No.				Position Applied for			
Desired Shift (circle one)			1 st 7 am – 3 pm			2 nd 3 pm – 11 pm			3 rd 11 pm – 7 am		
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?				
Overtime may be required typically on Saturday's at times with notice, are you able to work overtime?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		Are you currently a student		YES <input type="checkbox"/>		NO <input type="checkbox"/>
Are you on a layoff from another company and subject to recall?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		Are you at least 18 years of age?		YES <input type="checkbox"/>		NO <input type="checkbox"/>
When are you available to start?								Do you have reliable transportation?		YES <input type="checkbox"/> NO <input type="checkbox"/>	
How did you hear about our Company?								Were you referred to us, if so by whom?			
EDUCATION											
High School				Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
College				Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
Other				Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
SKILLS											
Skills and qualifications: Licenses, Skills, Training? Please list below											

PREVIOUS EMPLOYMENT

Company		Phone
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		

DISCLAIMER AND SIGNATURE

I authorize Mansfield Engineered Components to confirm any information that I have provided, and to obtain employment references and personal/ history and/ or other background information

I understand that any misrepresentation, falsification or material omission of information in this application form, may result in my failure to receive an offer of work or termination from employment with Mansfield Engineered Components if I am hired

I agree that my employment relationship with Mansfield Engineered Components can be terminated at will either by me or by Mansfield Engineered Components with or without Cause, and with or without notice at any time

Signature

Date