



P.O. Box 609  
 201 Nicholas Place  
 Avilla, IN 46710-0609  
 800.348.2880

1700 W. Washington St  
 Champaign, IL 61821  
 800.348.2880

### Employment Application

APPLICANT INFORMATION											
Last Name				First				M.I.		Date	
Street Address						Apartment/Unit #					
City				State				ZIP			
Phone				E-mail Address							
Date Available				Social Security No.				Desired Salary			
Position Applied for						Date of Birth:					
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?				
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain				
How did you hear about Wirco Inc.?											
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	
REFERENCES											
<i>Please list three professional references.</i>											
Full Name				Relationship							
Company						Phone					
Address											
Full Name				Relationship							
Company						Phone					
Address											
Full Name				Relationship							
Company						Phone					
Address											

<b>PREVIOUS EMPLOYMENT</b>											
Company								Phone			
Address								Supervisor			
Job Title						Skills used:					
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						Skills used:					
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						Skills used:					
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						Skills used:					
Responsibilities											
From		To		Reason for Leaving							
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>		NO <input type="checkbox"/>					
<b>MILITARY SERVICE</b>											
Branch								From		To	
Rank at Discharge								Type of Discharge			
If other than honorable, explain											
<b>GENERAL</b>											
Subjects or Special Study or Research Work:											
Job Related Skills (computer, driver's license certifications, etc.):											
Hobbies:											
<b>DISCLAIMER AND SIGNATURE</b>											
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.											
Date	Signature										



**If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.**

**AUTHORIZATION**

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

**I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be 'at will' and without fixed term, and my be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing by an authorized Company representative.**

If I am offered employment I agree to submit to a medical examination and drug test, if required, before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personal file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, if required, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that acceptance of this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies and procedures. The Company retains the right to revise its policies or procedures, in whole or in part, at any time.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_