

## Daanen & Janssen, Inc - APPLICATION FOR EMPLOYMENT

## PLEASE READ BEFORE FILLING OUT THIS APPLICATION

This COMPANY does not discriminate in hiring or employment on the basis of any categories protected by State or Federal law. No question on this application is intended to secure information to be used for such discrimination. The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

FIRST	MIDDLE	LAST NAME	PHONE NUMBER - Cell Home Work (circle one)
5	STREET ADDRESS		PHONE NUMBER - Cell Home Work (circle one)
CITY, STATE, AND ZIP CODE			EMAIL ADDRESS
	Length of time	e at the above add	ress:yrsmonths
ist previous add	ress within the United	d States, except M	ilitary, if address changed during the past year.
0.7	DEET ADDRESS	OLTY	STATE ZIP CODE FROM DATE TO DATE
	REET ADDRESS		STATE ZIP CODE   PROMIDATE   TO DATE
••			
•			or other – please list state)
Status preferre	d:  □ Full time or □	J Part time: <i>If pa</i>	art time – what hours/days are preferred:
Can vou work o	overtime?	Can you work	s SATURDAY? Can you work Sunday?
·			
Are there any h	ours you cannot we	ork? If so, please	list :
Date available t	for work:	<i>F</i>	Are you over 18 years of age? YES NO
HOW DID YOU	HEAR ABOUT TH		
HOW DID YOU	HEAR ABOUT TH	IIS POSITION &/	OR OUR COMPANY? Job Board/Site:
HOW DID YOU	HEAR ABOUT TH	IIS POSITION &/	OR OUR COMPANY? Job Board/Site:
HOW DID YOU	HEAR ABOUT TH apply) ledia:	Refe  GENERAL	OR OUR COMPANY? Job Board/Site: rral from: Other: L INFORMATION
HOW DID YOU	HEAR ABOUT TH apply) ledia: If you hav	Refe  GENERAI  /e actual experience	OR OUR COMPANY? Job Board/Site:  rral from: Other:  L INFORMATION in any of the following – Please Check √
HOW DID YOU (list all that Online/Social M	HEAR ABOUT TH apply) ledia: If you have	Refe  GENERAL  ve actual experience	OR OUR COMPANY? Job Board/Site:  rral from: Other:  L INFORMATION in any of the following – Please Check √  ARRY POSITIONS: DRIVING:
HOW DID YOU (list all that Online/Social M	HEAR ABOUT TH apply) ledia: If you have OFFICE: ints Payable	Refe  GENERAL  ve actual experience  QUA	OR OUR COMPANY? Job Board/Site:  rral from: Other:  L INFORMATION in any of the following – Please Check √  ARRY POSITIONS: DRIVING: Dump Truck Driver
HOW DID YOU (list all that Online/Social M	HEAR ABOUT TH apply) ledia:	Refe  GENERAL  //e actual experience  QUA  Produ  Equip	OR OUR COMPANY? Job Board/Site:  rral from: Other:  L INFORMATION in any of the following – Please Check √  ARRY POSITIONS: DRIVING: uction Crew □ Dump Truck Driver oment Operator MAINTENANCE:
HOW DID YOU (list all that Online/Social M	HEAR ABOUT TH apply) ledia:	Refe  GENERAL  //e actual experience  QUA  Produ  Equip	OR OUR COMPANY? Job Board/Site:  rral from: Other:  L INFORMATION in any of the following – Please Check √  ARRY POSITIONS: DRIVING: uction Crew □ Dump Truck Driver oment Operator
HOW DID YOU (list all that Online/Social M  Accou	HEAR ABOUT TH apply) ledia:	Refe  GENERAL  //e actual experience  QUA  Produ  Produ  Custo	OR OUR COMPANY? Job Board/Site:  rral from: Other:  L INFORMATION in any of the following – Please Check √  ARRY POSITIONS: DRIVING: action Crew Dump Truck Driver  ment Operator  MAINTENANCE:
HOW DID YOU (list all that Online/Social M  Accou	HEAR ABOUT TH apply) ledia:	Refe  GENERAL  /e actual experience  QUA  Produ  Produ  Custo	OR OUR COMPANY? Job Board/Site:  rral from: Other:  L INFORMATION in any of the following – Please Check √  ARRY POSITIONS: DRIVING: Dump Truck Driver  ment Operator  mer Service Loader Operator  mer Service / Serie Operator  mer Service / Serie Operator

## **EDUCATION**

NAME OF INSTITUTION	ADDRESS	MAJOR COURSE O SUBJECT	R COM	DE LEVEL PLETED CLE # of yr)	LAST ATTENDED MONTH & YEAR	DEGREE or DIPLOMA?
High School or Preparatory:						YES NO
Technical School:			1 2	2 3 4		
College:			1 2	2 3 4		
Graduate Work			1 2	2 3 4		
OTHER INFORMATION - Lis civic organizations. Also lis	t scholastic I t SEMINARS	nonors, office ATTENDED /	es held, &/e	or activitie ACE TRAII	s in school, or oth NING or RELEVAN	er educational or T SKILLS ACQUIRE
Are you planning to pursue furth	er studies?	☐ Yes	□ No	FEE	Day school	Night school
List any additional lang	guages you	are able to	speak:_		write□	read□ translate
Starting with <b>PRESENT</b> or and part-time jobs.						oyment, summer
Name and Address of Employ Company Name	From -	Employed To -	Starting	Leaving	Reason	For Leaving
Number and Street	Mo. & Yr.	Mo. & Yr.				
Number and Street						
City, State, and Zip Code						
TITLE / Position & Duties:			L	1		
Supervisor's Name:				Р	hone # ( )	-
-						
Name and Address of Employ	er Dates	Dates Employed		alary	Reason	For Leaving
Company Name	From - Mo. & Yr.	To - Mo. & Yr.	Starting	Leaving		
Number and Street						
City, State, and Zip Code						
TITLE / Position & Duties:						
Supervisor's Name:				PI	hone # ( )	-

Name and Address of Emp	loyer Dates E	mployed	Sa	alary	Reason For Leaving		
Company Name	From - Mo.& Yr.	To - Mo. & Yr.	Starting	Leaving			
Number and Street							
City, State, and Zlp Code							
FITLE / Position & Duties	:			1			
Supervisor's name:				Phor	ne# ( )	-	
Name and Address of Emp	lover Dates F	mployed	T 9:	alary	Reason For	Leaving	
Company Name	From - Mo.& Yr.	To - Mo. & Yr.	Starting	Leaving	Readont of	Louving	
Number and Street							
City, State, and Zip Code							
TITLE / Position & Duties	:						
Supervisor's name:	·	· · · · · · · · · · · · · · · · · · ·		Pho	ne # ( )		
If You need more space			-b4 of mo				
If you are now employe Computer Skills ( <i>plea</i> EXCEL (can BUIL	ase list only the	se you ha	ave ACTIV	ELY worke	ed in) WORD	OUTLOOK	
Have you ever been <i>rep</i>	orimanded or cou	nseled reg	jarding <b>atte</b> i	ndance iss	ues? If s	o, please descri	
**Have you <b>ever</b> been o but you <b>do not need to</b> and county in which imp	include <i>minor</i> t	raffic viol	ations) If so	o, identify th	ne type of convictior		
*Are there any pending **This information may position, date of offense employment decision.	not automatically	disqualify	you from co f violation, a	onsideratior and rehabili	n - Factors such as tation are considere	relation to ed in making an	
, ,	PROF	ESSIO	VAL RE	FERENC	ES		
Please <i>do not</i> list referenc						es/qualities.	
Name	Occupation		dress, City of State		Telephone Number	Number of years These people have known You	

There are three (3) signatures required on this application. Each one covers an important part of job-related information, and of your future employment, if you are hired. They are separate in order to emphasize each issue. You are urged to carefully read each before signing. If you have any questions, please ask the person who is taking this application, or the Human Resource Director.

## REFERENCE AUTHORIZATION

I understand that references will be contacted, and the Limited to those listed in my application. I authorize <b>E</b> information about my educational background, work elicensing, administrative, regulatory or any other gove source relevant to employability. I hereby release <b>Da</b> agents from liability for seeking such information, and organizations for furnishing such information.	Daanen & Janssen, Inc. to contact and experience, credit rating, and to secure ernmental agency, and to contact any oanen & Janssen, Inc. its subsidiaries,	secure records of ther informatior officers and
Date	Signature	
In processing this employment application, we may request that are information as to your employment, finances, and general reputation disclose to you the nature and scope of the investigation requested reasonable time after you complete this application. A separate information is to be done.	n. You have the right to request that we completely I. Such a request must be made in writing to this co	and accurately mpany within a
DRUG TE	STING	
I understand and agree that a Drug Screening Test is and will be done prior to employment. I understand the for refusal to hire.	s a condition of application for employm at positive testing results may be grour	ent, nds
I also understand and agree that the company reserv or alcohol screening test at any time after employment work-related medical examinations during the course	nt, and may also require me to submit to	
Date	Signature	
CERTIFICATION OF TRUTHFUL OF EMPLOYI	NESS & UNDERSTANDING	ì
I certify that the facts contained in this application are statements, or omissions in this application may re discharge.	e true and I understand that any false esult in rejection of this application, o	or misleading or if hired, in
I understand that <b>Daanen &amp; Janssen, Inc.</b> is an <b>Em</b> employment is for no definite period, and may be terr time, without notice, for any reason, or for no reason, me anything contrary to what is stated in this paragra	ninated at the will of myself or my empl No employee of the company is autho	loyer, at any rized to promise
I also understand that all rules manuals, employee had they do not form any sort of contract between mysel changed, or not applied, as the employer believes to	f and the employer, and they may be u	nilaterally
Date	Signature	(04/19)