



OFFICE USE ONLY:

Math: _____

Manual: _____

Employment Application

An Equal Opportunity Employer

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, disability, or genetics. All questions must be answered and application signed.

Position(s) Applied for _____ Date of Application / /

Referral Source: Advertisement Employee Relative Walk-In
Government Employment Agency Private Employment Agency
Internet _____ Other _____

Name: _____
Last First Middle

Current Address: _____ City: _____ State: _____ Zip: _____
Number Street

Phone Number: (____) _____ Email Address: _____

What date are you available for employment? _____ Date: _____

Type of employment desired: (check all that apply) Full time Part time Temporary Seasonal

Are you able to work overtime if required? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Have you previously applied for a position at this company? Yes No When?

Have you previously worked at this company? Yes No When?

Are you related to any past or current employees? If so, please list below.

Are you eligible to work in the United States? Yes No
(Proof of eligibility will be required before you can be employed.)

Have you ever pleaded guilty or been convicted of a felony or misdemeanor? Yes No
If yes, please explain: (date, location, charge, etc.)

Do you have a valid driver's license? Yes No

DL# _____ Type: _____ State of Issue _____

Have you had any moving violations in the past 3 Years? Yes No

If yes, please describe _____

Educational Background:

Type of School	Name/City	How Many Years Attended	Graduated	Course or Major
High School		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Post Graduate			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business or Trade			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other				

Employment History:

List your last three (3) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comments section below.

Employer:	Telephone: ()	<u>Dates Employed</u> Month & Year	Summarize the nature of the work performed and job responsibilities
		From To	
Address:			
Job Title:		Hourly Rate/Salary Starting	
Immediate Supervisor and Title:		\$ Per	
Reason for leaving:		Hourly Rate/Salary Final	
May we contact for reference / verification? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$ Per	

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May we contact for reference / verification? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$ Per	

Other skills and qualifications (e.g. certificates, licenses, professional societies/affiliations, computer skills)



References:

List name and telephone number of three business/work references that are not related to you. If not applicable, list three school or personal references that are not related to you, whom have knowledge of your work ethic, experience and abilities.

Name	Telephone	Years known	Relationship

I certify that the facts contained in this application and/or interview(s) are true and complete. Any misrepresentation or falsification of information or significant intentional omissions may be cause for rejection of my application or for post-employment discipline up to and including dismissal from employment if discovered at a later date.

I understand that if employed I will be an employee-at-will. As an employee-at-will, I understand that my employment is not guaranteed for any term, and my employment may be terminated by the employer or myself at any time and for any or no reason with or without prior notice. No representative of this company other than the President is authorized to make any assurance or promise of continued employment and any such assurance must be in writing signed by both parties. I further understand the employer reserves the right to modify compensation, as well as any other terms and conditions of employment, at any time.

If I am employed, I agree to comply with and be bound by all rules of conduct of this company as set forth in the employee handbook and all other forms of communication.

If I am hired, this form will be transferred to my individual personnel file (electronic or paper). If I am not hired or have not heard from this employer within 180 days, this application is no longer active and I will need to reapply for employment if I wish to be considered for a job with this company. Unsolicited applications may be kept for a shorter duration.

I agree to submit to a drug testing prior to and during employment under the terms of the employer's drug testing policy, which may include testing based on reasonable suspicion of abuse or influence as well as post-accident and/or post-injury testing.

In accordance with federal law, I understand that I must submit satisfactory proof of identity and eligibility to work in the United States within three (3) days of being hired to comply with Department of Homeland Security requirements.

Co-Ax Technology, Inc. is an Equal Opportunity Employer. This employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by federal, state or local law.

Co-Ax Technology, Inc. complies with the Americans With Disabilities Act and reasonable accommodations may be made to enable individuals with disabilities to perform essential functions of the position.

Signature of Applicant _____ Date _____

Please save filled form and email to coaxhr@coaxinc.com