

N112 W152521 Mequon Rd. Germantown, WI 53022

Phone: 262.253.1399 Fax: 262.253.1550

## **EMPLOYMENT APPLICATION**

We are an Equal Opportunity Employer

Applicant Information								
Name (first, n					Date			
Address (street, city, state, zip code)								
Email Addres	S	Day Telephone ( )	Ev (	vening Telephone )	(	Cell Phone		
Are there other names under which you have worked or attended school?   ☐ Yes ☐ No  ☐ No  ☐ Yes ☐ No  ☐ Yes ☐ No  ☐ Yes ☐ No								
Are you legally authorized to work in the U.S.?     Yes   No								
Are you at least 18 years old?   Yes   No  If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for and have obtained a valid work permit.								
Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations?   Yes   No   If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted. (Convictions are not an automatic bar to employment.)								
Do you have any <i>pending</i> criminal charges against you?   ☐ Yes ☐ No  If yes, describe the 1) nature of the charges, 2) date issued, and 3) county and state where issued.								
Have you every applied at this company before?  ☐ Yes ☐ No ☐ If yes, when:				Have you ever worked at this company before?  ☐ Yes ☐ No If yes, when:				
Position Applying For Position:				Wage Preference:				
When can you start?								
How were you referred to the company?   □ CGI Employee □ Friend/Relative □ Newspaper □ Walk –In □ Other □								
Education School	Name and Loca	tion (city, state)	No. Years Attended			Diploma or Degree Rec'd		
High			-			□ Yes □ No		
College			-			□ Yes □ No		
Trade or Business School			-			□ Yes □ No		

Training Courses							
List any relevant training progi		T					
Course/Seminar	Organization Sponsoring	Content	Date(s) Attended				
Required License(s)							
If required to drive a motor ver	nicle for the job that you are	applying for, state your:					
1) driver's license number		2) state issued 3) exp	iration date				
	start with most recer	nt; use separate sheet if necessa					
Name of Employer		Telephone ( )	<i>3 1</i>				
Address							
Job Title		Employment Dates (month and year)					
Name of Immediate Supervisor	•	From To					
Description of Duties							
Salary - start	Salary - end	Reason for Leaving					
If currently employed, may we	contact as a reference?	□ Yes □ No					
Name of Employer		Telephone ( )					
Address							
Job Title		Employment Dates (month and year)	Employment Dates (month and year)				
Name of Immediate Supervisor	•	From To					
Description of Duties							
Salary – start	Salary – end	Reason for Leaving					
Name of Employer		Telephone ( )					
Address							
Job Title		Employment Dates (month and year)	Employment Dates (month and year)				
Name of Immediate Supervisor	•	From To					
Description of Duties							
Salary – start	Salary – end	Reason for Leaving					
Name of Employer		Telephone ( )					
Address							
Job Title		Employment Dates (month and year)					
Name of Immediate Supervisor	•	From To					
Description of Duties							
Salary – start	Salary – end	Reason for Leaving					

Employment References						
List individuals familiar with your job qualifications (no relati	ve or personal friends).					
Name	Day Telephone ( )					
	Evening Telephone ( )					
Address						
Relationship	How long known?					
Name	Day Telephone ( )					
	Evening Telephone ( )					
Address						
Relationship	How long known?					
Name	Day Telephone ( )					
	Evening Telephone ( )					
Address						
Relationship	How long known?					
Name	Day Telephone ( )					
	Evening Telephone ( )					
Address						
Relationship	How long known?					
Kelationship	How long known:					
Please Pead Carefull	y Poforo Signing This Form					
	y Before Signing This Form					
1. All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.						
2. I authorize the company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.						
3. I understand that upon receiving a job offer, a drug screening and a physical are required.						
4. Regardless of whether or not I become employed by the company, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed, written document.						
Signed by Applicant	Date					