

Steven M. Hain Co., Inc.

Application for Employment

PERSONAL INFORMATION			Date _____	
Name: _____				
Last	First	Middle		
Present Address: _____				
Street	City	State	Zip	
Permanent Address: _____				
Street	City	State	Zip	
Social Security Number: _____			Date of Birth: _____	
Phone No.: _____		Referred By: _____		

EMPLOYMENT DESIRED					
Position: _____		Date you can Start: _____	Salary Desired: _____		
Are you presently employed?	YES	NO	If YES, May we inquire of your present employer?	YES	NO
Ever applied to this company before?	YES	NO	Where? _____	When? _____	

EDUCATION	Name & Location of School	Years Attended	Date Graduated	Subjects Studied
Grammar School	-----	-----		-----
High School	-----	-----		-----
College	-----	-----		-----
Trade or Business School	-----	-----		-----

GENERAL				
Subjects of Special Study: _____				
Research Work: _____				
What foreign languages do you speak fluently? _____		Read _____	Write _____	
US Military or Naval Service: _____			Rank: _____	
Are you presently a Member in National Guard or Reserves?		YES	NO	

SPECIAL QUESTIONS					
Height	Feet: _____	Inches: _____	Weight Lbs.: _____	U.S. Citizen	YES
NO					

The age discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

PHYSICAL RECORD

Do you have any physical defects that preclude you from performing any work for which you are being considered? YES NO

Have you ever been injured? YES NO Give Details: _____

Do you have any defects in Hearing? YES NO In Vision? YES NO In Speech? YES NO

EMERGENCY

In case of emergency notify: _____
 Name Address Phone No.

FORMER EMPLOYERS

(List below the last four employers, starting with last one first.)

Date Month/Year	Name & Address of Employer	Position	Salary	Reason for Leaving
From ----- To	-----			-----
From ----- To	-----			-----
From ----- To	-----			-----
From ----- To	-----			-----

REFERENCES

(List below the names of three references not related to you, whom you have known at least one year.)

Name	Address & Phone Number	Business	Years Known

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal, further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Signature: _____ Date: _____

DO NOT WRITE IN THIS SECTION

Interviewed By: _____ Date: _____

Remarks: _____

Neatness _____ Personality _____ Character _____ Ability _____

Hire Date _____ For Dept. _____ Position _____ Start Date _____ Salary/Wages _____

Approved (1) _____ (2) _____ (3) _____
 Employment Manager Dept. Head General Manager

This form has been designed to comply with State and Federal Fair Employment Practice Laws prohibiting discrimination on the basis of an applicant's sex or minority status. Questions directly or indirectly reflecting such status have been included only where needed to determine a bona fide occupational qualification or for other permissible purposes, such questions are appropriately noted on the application. Notwithstanding these efforts, the manufacturer of the form assumes no responsibility and hereby disclaims any liability for inclusion in this form, of any questions upon which a violation of State and Federal Fair Employment Practice Laws may be based.