

**EATON METAL PRODUCTS COMPANY LLC
EATON SALES & SERVICE LLC**

**EMPLOYMENT
APPLICATION**

PLEASE PRINT OR TYPE

APPLICANT IDENTIFICATION

LAST NAME	FIRST	INITIAL	DATE
PRESENT ADDRESS (Street, City, State, Zip)			PRESENT PHONE Include Area Code ()
PERMANENT ADDRESS (Street, City, State, Zip)			PERMANENT PHONE Include Area Code ()
SOCIAL SECURITY NUMBER			ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? ___ YES ___ NO

JOB INTERESTS

POSITION DESIRED	SALARY REQUIREMENT
STATUS PREFERENCE ___ FULL-TIME ___ PART-TIME ___ SUMMER	
SHIFT PREFERENCE ___ FIRST ___ SECOND ___ THIRD	
GEOGRAPHIC PREFERENCE	DATE AVAILABLE FOR WORK

GENERAL INFORMATION

HOW WERE YOU REFERRED TO US?	HAVE YOU EVER APPLIED HERE BEFORE? ___ YES ___ NO
FRIENDS OR RELATIVES NOW EMPLOYED HERE	
HAVE YOU BEEN CONVICTED OF A CRIMINAL OFFENSE WITHIN THE LAST 7 YEARS: A CONVICTION RECORD WILL NOT NECESSARILY BAR YOU FROM EMPLOYMENT. ___ YES ___ NO IF SO, PLEASE EXPLAIN	

EDUCATION

HIGH SCHOOL	DID YOU GRADUATE? ___ YES ___ NO	DEGREE //////////////////// ////////////////////
CITY STATE	LAST DATE ATTENDED MONTH/YEAR /	MAJOR(S) //////////////////// ////////////////////
COLLEGE	DID YOU GRADUATE? ___ YES ___ NO	DEGREE
CITY STATE	LAST DATE ATTENDED MONTH/YEAR /	MAJOR(S)
COLLEGE	DID YOU GRADUATE? ___ YES ___ NO	DEGREE
CITY STATE	LAST DATE ATTENDED MONTH/YEAR /	MAJOR(S)
GRADUATE SCHOOL	DID YOU GRADUATE? ___ YES ___ NO	DEGREE
CITY STATE	LAST DATE ATTENDED MONTH/YEAR /	MAJOR(S)
BUSINESS/TECHNICAL SCHOOL	DID YOU GRADUATE? ___ YES ___ NO	DEGREE
CITY STATE	LAST DATE ATTENDED MONTH/YEAR /	MAJOR(S)

EXTRA-CURRICULAR ACTIVITIES

List all extra-curricular and community involvements:
(Do not list any organizations, which would indicate your sex, age, marital status, race, color, religion or national origin.)

REFERENCES

List name, address and phone number of three references not related to you.

EMPLOYMENT INFORMATION

Starting with your present or last employer, list all jobs held. Include all work experience whether or not it is related to the job for which you are applying. (Attach additional sheet if necessary.)

DATES FROM / / TO / /	COMPANY NAME ADDRESS	POSITION PHONE NUMBER
SALARY	SUPERVISOR'S NAME	REASON FOR LEAVING
DATES FROM / / TO / /	COMPANY NAME ADDRESS	POSITION PHONE NUMBER
SALARY	SUPERVISOR'S NAME	REASON FOR LEAVING
DATES FROM / / TO / /	COMPANY NAME ADDRESS	POSITION PHONE NUMBER
SALARY	SUPERVISOR'S NAME	REASON FOR LEAVING
DATES FROM / / TO / /	COMPANY NAME ADDRESS	POSITION PHONE NUMBER
SALARY	SUPERVISOR'S NAME	REASON FOR LEAVING

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

JOB RELATED SKILLS

NOTE: Do not fill out any part of this section you believe to be non-job related.

LIST LANGUAGES IN WHICH YOU ARE FLUENT _____

YES NO IF THE JOB REQUIRES, DO YOU HAVE THE APPROPRIATE VALID DRIVER'S LICENSE?

DL# _____ TYPE _____ STATE ISSUED _____

YES NO HAVE YOU HAD ANY MOVING VIOLATIONS? PLEASE DESCRIBE _____

PLEASE LIST ANY OTHER SKILLS, LICENSES OR CERTIFICATES THAT MAY BE JOB-RELATED OR THAT YOU FEEL WOULD BE OF VALUE TO THIS JOB OR THE COMPANY _____

Eaton Metal Products Company LLC/Eaton Sales & Service LLC. do not discriminate in hiring or employment on the basis of marital status, race, color, religion, national origin, age, sex, disability of veteran status. No questions on this application are intended to secure information to be used for such discrimination.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. *After an offer for employment, and prior to reporting to work, Eaton Metal Products Company LLC/Eaton Sales & Service LLC will require a physical examination and illicit drug and alcohol testing by the Company's choice of clinic for each of its applicants. Unless the applicant's testing result for the use of illicit drug and alcohol is negative (not relative to race, color, religion or national origin) Eaton Metal Products Company LLC/Eaton Sales & Service LLC will be unable to offer employment. The applicant grants release of the medical records and findings obtained by the physician during the pre-employment physical.*

Eaton Metal Products Company LLC/Eaton Sales & Service LLC will arrange for a Motor Vehicle Report for each of its employees. For those employment openings requiring the employee to operate a Company owned vehicle during the course of business, the Motor Vehicle background must be acceptable to our insurance company (not relative to race, color, religion or national origin) or it will be difficult to secure this insurance and Eaton Metal Products Company LLC/Eaton Sales & Service LLC may be unable to offer employment.

I understand that if employed, I may be required to submit proof of citizenship or legal right to remain in the United States.

I certify that all information provided in this application is accurate and complete to the best of my knowledge. I authorize the verification of information and the release of references, grade transcripts and additional information pertinent to my employment from sources identified in this application. Providing false or misleading information may result in discharge.

I understand the employment for which I am applying may be terminated by either me or by Eaton Metal Products Company LLC/Eaton Sales & Service LLC. at any time and for any reason. I further understand that no employee of Eaton Metal Products Company/Eaton Sales & Service, Inc., other than its Board of Directors, has the authority to enter into any employment contract.

I hereby acknowledge that I have read the above statement and understand the same.

Signature of Applicant _____ **Date** _____

FOR OFFICE USE ONLY	
TO BE COMPLETED UPON HIRE	SPECIAL CONDITIONS OR COMMENTS
START DATE	
DEPARTMENT	
IMMEDIATE SUPERVISOR	
POSITION TITLE	
EMPLOYMENT NUMBER	
STARTING SALARY	
NEXT SALARY REVIEW DATE	
REFERRAL SOURCE	
EEO CATEGORY	
INTERVIEWER	