



Application for Employment

An Equal Opportunity Employer

Stock Equipment Company, Inc. is dedicated to a policy of non-discrimination in employment. No question is asked for the purpose of excluding any applicant due to race, creed, color, national origin, religion, age, sex, disability, height, weight, marital status, veteran status or citizenship and any other characteristics protected by law.

PERSONAL INFORMATION

Print Name in Full				
Last	First	Middle	Social Security Number	
Any aliases or other names, other than a legal name change, under which you have				
Street Address				
City	State	Zip Code	Phone Number	

Have you ever been convicted of a felony? Yes No

If yes, give date, charge and disposition of case.

Date	Offense	Circumstances	Place	Disposition
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Are there any charges currently pending against you? Yes No

If yes, give date, charge, and circumstances. (Pending charges will not necessarily disqualify you from employment.)

Date	Charge	Circumstances
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If under 18, can you furnish a work permit? Yes Not applicable

Do you have U.S. Military Service? Yes No

Dates: from	to	Branch	Duties/Special Training
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Application for Full Time Part Time Temporary Summer

Is there any reason you may not be able to work any day or shift during the week, if necessary?

If yes, please explain

What Position are you applying for?

Are you on layoff and subject to recall? Yes No

Type(s) of work for which qualified

Date available for work Salary desired \$ per Hour Week Month (circle one)

Have you ever worked for Stock Equipment Company? Yes No

If yes, state date, plant and job title

Date	Plant	Job Title
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EDUCATION

Circle highest grade completed 1 2 3 4 5 6 7 8 9 10 11 12

Years in College or Vocational School 1 2 3 4 5 6 7 8

High School

Name					City					State				
<input type="checkbox"/> Yes <input type="checkbox"/> No														
No. of Years Completed			Course Major/Minor			Did You Graduate			Degree or Diploma			Grade Avg.		

College(s)

Name					City					State				
<input type="checkbox"/> Yes <input type="checkbox"/> No														
No. of Years Completed			Course Major/Minor			Did You Graduate			Degree or Diploma			Grade Avg.		

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<input type="checkbox"/> Yes <input type="checkbox"/> No														
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Post Graduate Education (include correspondence, night, trade school etc.)

Name					City					State				
<input type="checkbox"/> Yes <input type="checkbox"/> No														
No. of Years Completed			Course Major/Minor			Did You Graduate			Degree or Diploma			Grade Avg.		

Extra Curricular Activities

List offices, clubs, athletics, honorary societies and other activities you consider pertinent.
(Exclude information indicative of race, sex, religion, color, age, disability, national origin, or veteran status.)

Special Skills, Qualifications or Knowledge

Please summarize any special skills, qualifications or knowledge not shown elsewhere on this form.
(Exclude information indicative of race, sex, religion, color, age, disability, national origin, or veteran status.)

EMPLOYMENT

List employment starting with your most recent employer. Account for all periods, including U.S. Armed Forces service, self-employment and periods of unemployment. All information must be completely filled out, please don't leave any information blank. If the space provided does not cover at least 7 years, attach additional sheet or complete resume. Please note that it is our policy to thoroughly check applicant's work and/or educational backgrounds. Omissions or misstatements of fact are cause for disqualification. Partial or incomplete Employment Applications will not be accepted.

If employed, may we contact your present employer now? Yes No

Firm Name	Street Address	City	State	Zip	Phone Number	
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dates	Job Title	Supervisor's Name	Base Earnings \$	per Hour	Week	Month
Responsibilities						
Reason for Leaving						

Firm Name	Street Address	City	State	Zip	Phone Number	
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Responsibilities						
Reason for Leaving						

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Dates	Job Title	Supervisor's Name	Base Earnings \$	per Hour	Week
					Month
Responsibilities					
Reason for Leaving					

BUSINESS REFERENCES

Give names of people, former employers, and business contacts who have known you three years or more.

Name	Street address & Phone Number	Occupation	Length of Acquaintance
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I certify that the information contained in this application or any resume I have supplied is correct and understand that falsification of this information is grounds for dismissal in accordance with Stock's policy. I hereby authorize a background check of my past employment, activities, and statements contained in this application and release from all liability and responsibility all persons, companies or corporations supplying such information. I understand that such information may include a record of disciplinary action assessed by previous employers and hereby release such parties from any obligation to provide me with written notification of such disclosure.

I understand that in order to be hired, I must establish my legal right to work in the United States. When requested, later in the application process, I will provide Stock with documentation establishing my right to work. I also understand that I must satisfactorily complete a pre-employment physical examination and drug screen.

I agree to conform to the policies and regulations of Stock Equipment Company, Inc. and recognize that my employment can be terminated at any time with or without cause and with or without notice at any given time, at the option of either Stock or myself. I understand that compensation, benefits, and Stock policies may be amended, modified or eliminated at any time with or without notice. I further understand that no person has any authority to enter into any agreement of employment for a specified period of time, or to make any agreement contrary to the foregoing, except a written agreement signed by the President of the Stock Equipment Company, Inc.

Signature

Date