

EMPLOYMENT APPLICATION: We are an Equal Opportunity Employer. We comply with all applicable Federal, State, and local laws concerning discrimination in employment. No question in this application is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law.

POSITION(S) APPLIED FOR			APPLICATION DATE		
LAST NAME		FIRST NAME		MIDDLE INITIAL	
ADDRESS		CITY	STATE		ZIP
TELEPHONE		SOCIAL SEC #		DRIVER'S LICENSE #	
DATE AVAILABLE FOR WORK		EMPLOYMENT TYPE (CIRCLE): FULL-TIME PART-TIME TEMP			
ARE YOU WILLING TO WORK OVERTIME AS REQUIRED: YES NO					

Were you previously employed by this organization (circle one): YES NO If yes, Dates employed:

Department or Positions:

List any relatives or friends working for this organization:

**WORK EXPERIENCE - LIST MOST RECENT FIRST AND ALL EMPLOYERS FOR THE LAST 10 YEARS**

FROM (MO/YR) TO (MO/YR)		COMPANY NAME AND ADDRESS		TELEPHONE NO	
LAST POSITION HELD		DESCRIBE YOUR WORK IN AS MUCH DETAIL AS POSSIBLE			
SUPERVISOR'S PHONE NO					
SUPERVISOR'S NAME & TITLE		LAST WAGES PAID	REASON FOR LEAVING		
MAY WE CONTACT THIS EMPLOYER: YES NO					
FROM (MO/YR) TO (MO/YR)		COMPANY NAME AND ADDRESS		TELEPHONE NO	
LAST POSITION HELD		DESCRIBE YOUR WORK IN AS MUCH DETAIL AS POSSIBLE			
SUPERVISOR'S PHONE NO					
SUPERVISOR'S NAME & TITLE		LAST WAGES PAID	REASON FOR LEAVING		
MAY WE CONTACT THIS EMPLOYER: YES NO					
FROM (MO/YR) TO (MO/YR)		COMPANY NAME AND ADDRESS		TELEPHONE NO	
LAST POSITION HELD		DESCRIBE YOUR WORK IN AS MUCH DETAIL AS POSSIBLE			
SUPERVISOR'S PHONE NO					
SUPERVISOR'S NAME & TITLE		LAST WAGES PAID	REASON FOR LEAVING		
MAY WE CONTACT THIS EMPLOYER: YES NO					

**WORK EXPERIENCE - CONTINUED (USE ADDITIONAL SHEETS IF NECESSARY)**

FROM (MO/YR) TO (MO/YR)	COMPANY NAME AND ADDRESS	TELEPHONE NO
LAST POSITION HELD	DESCRIBE YOUR WORK IN AS MUCH DETAIL AS POSSIBLE	
SUPERVISOR'S PHONE NO		
SUPERVISOR'S NAME & TITLE	LAST WAGES PAID	REASON FOR LEAVING
MAY WE CONTACT THIS EMPLOYER: YES NO		

**EDUCATION**

SCHOOL	CITY/STATE	NO. YRS	DEGREE / COURSE OF STUDY
High School			
College			
Other			

**SPECIAL SKILLS AND QUALIFICATIONS - MECHANICAL OR TECHNICAL ABILITIES RELEVANT TO THE POSITION**

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**LIST 3 REFERENCES (known for 1 year of more/must not be related)**

NAME	ADDRESS	PHONE #	RELATIONSHIP	YEARS KNOWN

**MISCELLANEOUS INFORMATION**

Have you ever been convicted of a crime in the past 7 years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court? (A conviction record will not necessarily be a bar to employment.) Circle one: YES NO

If "YES," please explain and describe in full detail:

Have you ever initiated an act of violence in the workplace? YES NO If "YES," please explain in full detail:

Can you verify your legal rights to work in the US by providing a birth certificate, proof of US Citizenship, or by some other means?

YES NO (Passports are acceptable)

If you are under 18, are you able to furnish a work permit? YES NO

**APPLICANT'S CERTIFICATION - PLEASE READ CAREFULLY BEFORE SIGNING.**

I certify that the answers given by me to the foregoing questions and the statements made by me in this application are correct and complete. I understand that if I become employed, a misrepresentation or omission of fact in this application may result in my discharge from employment. I authorize Mid-Atlantic Crane, as part of its evaluation of my suitability for employment, to contact all school officials, references, and my previous supervisors to secure information concerning my skills, character, and abilities. I also authorize Mid-Atlantic Crane to check driving records and criminal records as needed. I further acknowledge and agree that no manager or representative of Mid-Atlantic Crane has any authority to enter into any employment agreement. I understand and agree that if I am employed, I will be an At-Will Employee and Mid-Atlantic Crane and Equipment Co. Inc. may terminate my employment at any time and for any or no reason without prior notice.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_