



FRANKLIN PRECISION INDUSTRY
 3220 BOWLING GREEN ROAD
 FRANKLIN, KY 42134
AN EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR EMPLOYMENT

PLEASE PRINT

POSITION(S) APPLIED FOR _____ DATE OF APPLICATION ____ / ____ / ____

REFERRAL SOURCE: ADVERTISEMENT EMPLOYEE RELATIVE
 WALK-IN GOVERNMENT EMPLOYMENT AGENCY PRIVATE EMPLOYEE AGENCY
 OTHER NAME OF SOURCE(IF APPLICABLE) _____

NAME _____
 (FIRST) (MIDDLE) (LAST)

ADDRESS _____
 (STREET) (CITY) (STATE) (ZIP CODE)

TELEPHONE NUMBER (____) _____ - _____ SOCIAL SECURITY NUMBER _____ - _____ - _____

CELL PHONE NUMBER (____) _____ - _____

IF NECESSARY, BEST TIME TO CALL YOU AT HOME IS..... _____

MAY WE CONTACT YOU AT WORK?..... YES NO

IF YES, WORK NUMBER AND BEST TIME TO CALL.....(____) _____ - _____

ARE YOU AT LEAST 18 YEARS OF AGE?..... YES NO

HAVE YOU FILED AN APPLICATION HERE BEFORE?..... YES NO

IF YES, GIVE DATE..... ____ / ____ / ____

HAVE YOU EVER BEEN EMPLOYED HERE BEFORE?.....YES NO

IF YES, GIVE DATES.....FROM ____ / ____ / ____ TO ____ / ____ / ____

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THIS COUNTRY?..... YES NO
 (PROOF OF U.S. CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT)

DATE AVAILABLE FOR WORK..... ____ / ____ / ____

TYPE OF EMPLOYMENT DESIRED: FULL TIME PART TIME TEMPORARY SEASONAL CO-OP

ARE YOU ON LAY-OFF AND SUBJECT TO RECALL?..... YES NO

WILL YOU RELOCATE IF JOB REQUIRES IT?..... YES NO.....TRAVEL? YES NO

WILL YOU WORK OVERTIME IF REQUIRED?..... YES NO

IF REQUIRED BY THE EMPLOYER, WILL YOU UNDERGO PRE-EMPLOYMENT PHYSICAL?.... YES NO

HAVE YOU BEEN CONVICTED OF A FELONY IN THE LAST SEVEN (7) YEARS?..... YES NO
 (SUCH CONVICTION MAY BE RELEVANT IF JOB RELATED, BUT DOES NOT BAR YOU FROM EMPLOYMENT.)

IF YES, PLEASE EXPLAIN: _____

DRIVER'S LICENSE NUMBER(IF REQUIRED BY JOB)..... STATE _____

EMPLOYMENT HISTORY

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience.

Explain any gaps in employment in comments section below.

EMPLOYER ()	TELEPHONE ()	DATES EMPLOYED From To		JOB DUTIES / RESPONSIBILITIES
ADDRESS				
JOB TITLE		HOURLY RATE / SALARY STARTING		
IMMEDIATE SUPERVISOR		\$	PER	
REASON FOR LEAVING		HOURLY RATE FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	PER	
EMPLOYER ()		DATES EMPLOYED From To		
ADDRESS				
JOB TITLE		HOURLY RATE / SALARY STARTING		
IMMEDIATE SUPERVISOR		\$	PER	
REASON FOR LEAVING		HOURLY RATE FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	PER	
EMPLOYER ()		DATES EMPLOYED From To		
ADDRESS				
JOB TITLE		HOURLY RATE / SALARY STARTING		
IMMEDIATE SUPERVISOR		\$	PER	
REASON FOR LEAVING		HOURLY RATE FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	PER	
EMPLOYER ()		DATES EMPLOYED From To		
ADDRESS				
JOB TITLE		HOURLY RATE / SALARY STARTING		
IMMEDIATE SUPERVISOR		\$	PER	
REASON FOR LEAVING		HOURLY RATE FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	PER	

COMMENTS (including explanation of any gaps in employment)

SKILLS AND QUALIFICATIONS

SUMMARIZE SPECIAL SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCES THAT MAY QUALIFY YOU FOR WORK WITH OUR COMPANY.

EDUCATIONAL BACKGROUND

- A. LIST THE LAST THREE (3) SCHOOLS ATTENDED, *STARTING WITH THE LAST ONE*. B. LIST THE NUMBER OF YEARS COMPLETED.
- C. INDICATE DEGREE OR DIPLOMA EARNED, IF ANY. D. GRADE POINT AVERAGE OR CLASS RANK AND E. MAJOR AND MINOR FIELD OF STUDY

A. School Attended	B. Years completed	C. Degree / Diploma	D. GPA / Class Rank	E. Major	E. Minor

LIST ANY FOREIGN LANGUAGE(S) AND CHECK THE BOX THAT BEST DESCRIBES YOUR SKILL LEVEL.

LANGUAGE	READ AND WRITE	READ AND SPEAK	READ ONLY	SPEAK ONLY

REFERENCES

LIST NAME AND TELEPHONE NUMBER OF THREE BUSINESS / WORK REFERENCES WHO ARE NOT RELATED TO YOU. IF NOT APPLICABLE, LIST THREE SCHOOL OR PERSONAL REFERENCES WHO ARE NOT RELATED TO YOU.

NAME	TELEPHONE	YEARS KNOWN
	()	
	()	
	()	

LIST PROFESSIONAL, TRADE, BUSINESS OR CIVIC ASSOCIATIONS AND ANY OFFICES HELD. (EXCLUDE MEMBERSHIPS WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, ANCESTRY OR OTHER PROTECTED STATUS.)

ORGANIZATION	OFFICES HELD

LIST SPECIAL ACCOMPLISHMENTS, PUBLICATIONS, AWARDS, (EXCLUDE INFORMATION WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, ANCESTRY OR OTHER PROTECTED STATUS.)

LIST ANY ADDITIONAL INFORMATION YOU WOULD LIKE US TO CONSIDER.

VIETNAM ERA VETERAN..... YES NO

IF YOU ARE HANDICAPPED AND WISH TO BE IDENTIFIED AS SUCH ACCORDING TO THE REHABILITATION ACT OF 1973, PLEASE INDICATE BY CHECKING THE BOX.....

IT IS UNDERSTOOD AND AGREED THAT ANY MISREPRESENTATION BY ME IN THIS APPLICATION WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF THIS APPLICATION AND/OR SEPARATION FROM THE EMPLOYER'S SERVICE IF I HAVE BEEN EMPLOYED. FURTHERMORE, I UNDERSTAND THAT JUST AS I AM FREE TO RESIGN AT ANY TIME, THE EMPLOYER RESERVES THE RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE.

I UNDERSTAND THAT NO REPRESENTATIVE OF THE EMPLOYER HAS THE AUTHORITY TO MAKE ANY ASSURANCES TO THE CONTRARY.

I GIVE THE EMPLOYER THE RIGHT TO INVESTIGATE ALL REFERENCES AND TO SECURE ADDITIONAL INFORMATION ABOUT ME. IF JOB RELATED, I HEREBY RELEASE FROM LIABILITY THE EMPLOYER AND IT'S REPRESENTATIVES FOR SEEKING SUCH INFORMATION AND ALL OTHER PERSONS, COOPERATION'S OR ORGANIZATIONS FOR FURNISHING SUCH INFORMATION.

THE EMPLOYER IS AN EQUAL OPPORTUNITY EMPLOYER. THE EMPLOYER DOES NOT DISCRIMINATE IN EMPLOYMENT AND NO QUESTION ON THIS APPLICATION IS USED FOR THE PURPOSE OF LIMITING OR EXCLUDING ANY APPLICANT'S CONSIDERATION FOR EMPLOYMENT ON A BASIS PROHIBITED BY LOCAL, STATE OR FEDERAL LAW.

THIS APPLICATION IS CURRENT FOR ONLY (60) DAYS. AT THE CONCLUSION OF THIS TIME, IF I HAVE NOT HEARD FROM THE EMPLOYER AND STILL WISH TO BE CONSIDERED FOR EMPLOYMENT, IT WILL BE NECESSARY FOR ME TO FILL OUT A NEW APPLICATION.

SIGNATURE OF APPLICANT

DATE