



(AN EQUAL OPPORTUNITY EMPLOYER)

Application for Employment

DATE: _____

Personal																							
Name _____ <small>LAST FIRST MIDDLE</small>		Social Security # _____																					
Present Address _____ <small>STREET CITY STATE ZIP</small>		Home Phone #() _____ Cell Phone # () _____																					
Do you have a valid driver's license? Y/N _____ License# _____ Exp. _____		Are you 18 years or older? Y/N _____																					
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Y/N																							
Are you willing to travel if job requires it? Yes/No	Position Applied For: Salary Desired:		Referred By:																				
Have you ever interviewed with the Company or its affiliates before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list date(s), job title(s) & location(s)																					
Are you employed now? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, may we inquire of your present employer?																					
Please provide the names and phone numbers of three persons (non-relative) who we may contact as references:	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">NAME</th> <th style="width: 30%;">Business</th> <th style="width: 30%;">Relationship (i.e. co-worker)</th> <th style="width: 15%;">Phone Number</th> <th style="width: 10%;">Years Acquainted</th> </tr> </thead> <tbody> <tr> <td>1. _____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>2. _____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>3. _____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	NAME	Business	Relationship (i.e. co-worker)	Phone Number	Years Acquainted	1. _____	_____	_____	_____	_____	2. _____	_____	_____	_____	_____	3. _____	_____	_____	_____	_____		
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2. _____	_____	_____	_____	_____																			
3. _____	_____	_____	_____	_____																			

Education			
Name and Location School:	Number of years attended	Major Studies	Did you graduate?
High School			
College/University			
Vocational, Business, Other			
List Any Professional Designations			
Other Special Knowledge, Skills or Qualifications			
Activities (Civic, Athletic, etc)			
U.S. Military or Naval Service	Rank	Present Membership in National Guard or Reserves	

Employment History			
List below last three employers, starting with the most recent position. All information must be completed. You may attach a resume, but not in place of completing the required information.			
Dates Employed:	Employer Name/Address/Phone	Salary/Position	Reason for leaving: What did you like most about this job?
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Signature: _____ Date: _____

ATTACHMENT: Disclosure and Consent for Background Release

**ADDENDUM TO WATERLINE INDUSTRIES CORPORATE
EMPLOYMENT APPLICATION SCREENING AUTHORIZATION**

1. I certify that I have never been convicted of a criminal offense. Further, I certify that I have never been convicted for any offense involving sexual misconduct or moral turpitude.

2. I certify that the facts contained in this application are true and complete to the best of my knowledge and belief. I acknowledge and understand that Waterline Industries, Corp. WILL BE RELYING ON the information contained in this application and that the information is complete and accurate. I further understand and agree that, if employed, any falsified statements or any material half-truths, material misstatements or omissions on this application, without full disclosure of all relevant facts, shall be grounds for Waterline Industries, Corp. to immediately VOID any employment contract with me, and shall be grounds for my immediate dismissal from employment with Waterline Industries Corporation.

3. I hereby authorize without reservation, any party or agency contacted by WIC and its administrators to fully investigate all statements contained herein. Further, I authorize all references listed and all previous employers to give Waterline Industries, Corp. any pertinent information they may have, personal or otherwise, relative to me and/or my employment. I hereby release all parties from any and all liability for damages I may claim to suffer as a result of their furnishing such information to Waterline Industries Corporation representatives.

4. I understand that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that effect is executed by the employer and employee in writing.

5. In the event I am employed, I realize that I am required to abide by all rules and regulations of the employer.

Signed on this date _____, 20____

Applicant Signature _____

WATERLINE INDUSTRIES EMPLOYMENT PROCESS

No person shall be considered for employment until such time as a complete application is received, reviewed and accepted.

A complete application is required for **all** positions and includes the following:

1. Resume (as requested for specific position).
2. Written reference verification(s).
(Professional references **must** be position specific.)
3. Licensure or certification verification where applicable
4. Skill tests or work sampling (as required for specific positions).
5. An offer of employment is contingent upon the following: receipt of satisfactory references; sanction check to verify you have not been excluded from federal health insurance programs; and verification of professional licensure or certification, if applicable.
6. Satisfactory completion of a physical exam is necessary to assess whether an employee has the physical capabilities to perform the essential functions of the job to which he/she will be assigned and what accommodation, if any, may be needed. Drug and alcohol testing may also be necessary as required for specific positions.
7. If additional medical evaluation is indicated, the employee will not be permitted to begin work until an occupational health physician has completed his/her assessment. In some cases, additional tests – such as physical capacity evaluations – may be required. Every effort will be made to accomplish a timely resolution, however; a timeframe of approximately two (2) weeks or more may be necessary if additional test and/or information are required.
8. The new employee is permitted to begin work only after all the above requirements have been met.

Applicant Signature

Date

WIC/EEO/DFWP (Drug Free Workplace)