

# Application For Employment

Precision Manufacturing llc  
PO Box 70  
850 State Hwy 55  
Brooten, MN 56316  
320-346-4361

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For \_\_\_\_\_ Date of Application \_\_\_\_\_

LAST NAME FIRST MIDDLE DATE  
PRESENT ADDRESS CITY/STATE ZIP CODE TELEPHONE NUMBER

Are you currently employed? \_\_\_\_\_

May we contact your present employer? \_\_\_\_\_

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range? \_\_\_\_\_

Are you available to work: \_\_\_\_ Full Time (Please indicate 1 2 3 shift)  
\_\_\_\_ Part Time (Please indicate Morning Afternoon Evening)  
\_\_\_\_ Temporary (Please indicate dates available \_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_)

## EDUCATION

SCHOOL	Name and Address of School	Course of Study	No. of Years Completed	Degree/Diploma
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HIGH SCHOOL

UNDERGRADUATE COLLEGE

GRADUATE/ PROFESSIONAL

OTHER (SPECIFY)

**WORK EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

**Comments: Include explanation of any gaps in employment.**

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**Describe any specialized training, apprenticeship, skills and extra-curricular activities.**

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**Additional Information**

Other Qualifications: Summarize special job-related skills and qualifications acquired from employment or other experience.

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**Personal/Professional References** Do not include family members or past supervisors.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Best time to call: \_\_\_\_\_ Occupation: \_\_\_\_\_

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**Applicant's Statement**

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interviews(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_