

# Sherwin Industries, Inc.

## Application for Employment

Sherwin Industries is currently seeking shop/labor workers for our Milwaukee Location. Please send this application via email: [al44sherwin@gmail.com](mailto:al44sherwin@gmail.com), drop off in person, or mail to 2129 W Morgan Ave. Milwaukee, WI 53221 ATTN Al Schultz

### PERSONAL INFORMATION

#### **NAME DATE**

FIRST MIDDLE LAST

#### **PRESENT**

#### **ADDRESS**

STREET

CITY STATE

ZIP CODE

PHONE #

CELL #

OTHER PH. #

E-MAIL

ARE YOU A U.S. CITIZEN? YES \_\_\_ NO \_\_\_ DO YOU HAVE A VALID DRIVERS LICENSE? YES \_\_\_ NO \_\_\_

HAVE YOU BEEN CONVICTED OF A FELONY? YES \_\_\_ NO \_\_\_ IF YES, EXPLAIN

### DESIRED EMPLOYMENT

POSITION

DESIRED START DATE

DESIRED SALARY?

PER HOUR \$

OR ANNUAL \$

ARE YOU CURRENTLY EMPLOYED? YES \_\_\_ NO \_\_\_

IF YES, WHERE?

HAVE YOU EVER APPLIED HERE BEFORE? YES \_\_\_ NO \_\_\_

IF YES, WHEN?

**EDUCATION**

<b>LEVEL</b>	<b>NAME AND LOCATION</b>	<b>YEARS ATTENDED</b>	<b>DID YOU GRADUATE</b>
<b>MIDDLE SCHOOL</b>			
<b>HIGH SCHOOL</b>			
<b>COLLEGE/ TECH SCHOOL</b>			
<b>OTHER SCHOOLING</b>			

**PAST EMPLOYMENT (please list last three jobs)**

<b>MONTH DATES AND YEAR</b>	<b>NAME AND LOCATION</b>	<b>SALARY</b>	<b>POSITION / JOB DUTIES</b>	<b>REASON FOR LEAVING</b>
<b>From:</b> ----- <b>To:</b>				
<b>From:</b> ----- <b>To:</b>				
<b>From:</b> ----- <b>To:</b>				

**REFERENCES (please list at least three)**

<b>NAME (First and Last)</b>	<b>ADDRESS AND PHONE NUMBER</b>	<b>BUSINESS/ RELATIONSHIP</b>	<b>YEARS ACQUAINTED</b>
	<b>Phone #</b>		
	<b>Phone #</b>		
	<b>Phone #</b>		

**PHYSICAL HISTORY**

**DO YOU HAVE ANY PHYSICAL DEFECTS THAT MAY PREVENT YOU FROM PERFORMING ANY OF THE DUTIES REQUIRED FOR THE POSITION YOU'RE APPLYING FOR? YES \_\_\_\_ NO \_\_\_\_ IF YES, EXPLAIN**

\_\_\_\_\_

\_\_\_\_\_

**HAVE YOU ANY DEFECTS IN: HEARING? \_\_\_\_\_ VISION? \_\_\_\_\_ SPEECH? \_\_\_\_\_**

**IN CASE OF AN EMERGENCY NOTIFY: NAME \_\_\_\_\_ PHONE # \_\_\_\_\_**

**MILITARY SERVICE**

**BRANCH: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_**

**RANK AT DISCHARGE: \_\_\_\_\_ TYPE OF DISCHARGE: \_\_\_\_\_**

**DISCLAIMER AND SIGNATURE**

**I CERTIFY THAT MY ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I FURTHERMORE AUTHORIZE THE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR IMMEDIATE DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.**

**SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

**PRINT NAME \_\_\_\_\_**