

APPLICATION FOR EMPLOYMENT

We are an equal opportunity/affirmative action employer dedicated to a policy of compliance with all federal, state, and local laws regarding nondiscrimination in employment. Consistent with the Americans with Disabilities Act, applicants may request accommodations needed to participate in the application process.

POSITION APPL	YING FOR:										
PLEASE PRINT L	EGIBLY TO ENSURE	THAT	WE CAN	CONT	ACT Y	<i>OU</i>					
	F	PERSO	ONAL I	NFOI	RMA	TION					
Full Name											
Street Address								Email			
City	City			Sta	State			Zip			
Phone No.				Ho	How long at current address?						
Date Available to Start:				Shi	Shift availability - circle all that apply: 1st 2nd 3rd						
Other Names Used	d										
	PRIOR MAILIN	NG AI	DRES	SES F	OR T	THE L	AST	5 YEAI		From	
Street Address		City		State	State 7		Zip Co		ounty N		To Mo/Yr
			EDUC	CATIO)N						
	Name of School		Location		Major		Years Completed		Did you graduate?	GPA	
High School							J -			G	
College											
Grad School											
Trade/Business											
Other											

January, 2018 Page 1

	ОТН	ER LICENSES/CEF	TIFICATIONS	
Type of License		License or Cert #	State of Issue	Expiration Data
Type of License		License of Cert #	State of issue	Expiration Date
Other special skills	s or experience (comp	puter proficiency, specia	l training, languages	spoken, etc):
	DI I	EMPLOYMENT H		
Moy we contact	Please li t your current em	ist beginning with present or ployer? YES	nost recent employer.	
DATES	Employer	ployer: 1125	NO	
From	Location			
110111	Position		Phone	
То	Supervisor		Reason for I	Leaving
	Describe Duties:			
DATES	Employer			
From	Location			
	Position		Phone	
То	Supervisor		Reason for I	Leaving
	Describe Duties:			
DATES	Employer			
From	Location			
	D		- Di	
	Position		Phone	
То	Supervisor Supervisor		Reason for I	Leaving
То				Leaving
То	Supervisor			Leaving
	Supervisor	lucts?		Leaving
	Supervisor Describe Duties:	lucts?		Leaving
	Supervisor Describe Duties:	lucts?		Leaving
How did you hear	Supervisor Describe Duties: about Manzana Prod		Reason for I	
How did you hear	Supervisor Describe Duties: about Manzana Processly applied to work at	ducts?		Leaving

If you are to be hired by the Manzana Products, the Immigration Reform and Control Act of 1986 requires you, on INS Form I-9,"Employment Eligibility Verification", to attest to your identity and employment eligibility and to present to us for our examination certain documents evidencing your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements. We will notify you when to present such documents in the event you are hired by us.

Phone Number:

Are you eligible to work in the United States?

YES

NO

January, 2018 Page 2

APPLICANT'S CERTIFICATION OF AGREEMENT

(This application is not complete until the following information has been read and signed.)

I certify that all the statements contained in this application are true and correct. I understand that any false statements, omissions or misrepresentations will constitute sufficient cause and reason for refusal of employment or termination of employment.

I understand that all offers of employment from Manzana Products Co., Inc. are contingent upon passing preemployment background and drug screenings. I also understand that a job offer will be automatically withdrawn in the event that I refuse to submit to background and/or testing, if the test reveals a confirmed positive result for current illegal drug use or if, in the opinion of the testing laboratory, the testing sample has been tampered with, substituted with, or altered in any way.

I understand, acknowledge and agree that if employed by Manzana Products, except as it applies to the Collective Bargaining Agreement, my employment will be at will and without fixed term, and that either of us may terminate the employment at any time with or without prior notice and with or without cause. I also understand that this at will employment may not be changed, altered, or amended, except in writing, signed by a duly authorized official of the Company, expressly and specifically so providing.

If employed, I agree to abide by all rules, regula	ations and policies of the Company as may be	in effect from time
to time.		
		
Applicant's Signature	Date	

January, 2018 Page 3