

Application For Employment

Yampa Precision Manufacturing, Inc.
 2420 N. 5TH Street
 Prescott Valley, AZ 86314
 (928) 772-6616

We consider applicants for positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

PLEASE PRINT LEGIBLY

Name _____ Telephone Number _____
 Address _____ Best Time(s) to Call _____
 _____ Social Security Number _____ - _____ - _____
 Position(s) Applied For _____ Date of Application _____

		Yes	No
If you are under 18 years of age, upon request will you provide proof of your eligibility to work?.....	___	___	___
Have you previously filed an application for employment with us?.....	___	___	___
If yes, provide date _____			
Have you previously been employed by us?.....	___	___	___
If yes, provide dates From ___/___/___ To ___/___/___			
Are you legally eligible for employment in this country?.....	___	___	___
<small>(Proof of citizenship or immigration status is required upon employment)</small>			
Will you work overtime as necessary and as required?.....	___	___	___
Will you travel if a job requires it?.....	___	___	___
If currently employed, may we contact your present employer?.....	___	___	___
May we contact prior employers?.....	___	___	___
Are you currently on "lay-off" status and subject to recall?.....	___	___	___
Are you able to perform all the essential functions of the position for which you are applying?.....	___	___	___
If no, is there a reasonable accommodation that can be made? _____			

Have you been convicted of a felony within the last seven (7) years?..... ___ ___
(Conviction may be relevant if job-related, and does not necessarily bar you from employment)
 If yes, please explain _____

On what date would you be available for work? ___/___/___
 Type of employment desired ___ Full-Time ___ Part-Time ___ Temporary
 Shift desired ___ Day ___ Night ___ No Preference
 Desired rate of pay \$ _____

Employment History

Start with your most recent job, and list your last four employers. You may include job-related military assignments or volunteer activities. **Organizations or experiences which indicate race, color, religion, gender, national origin, disabilities or other protected status may be excluded.**

Employer _____ Telephone _____ Address _____ _____ Job Title _____ Immediate Supervisor and Title _____ Reason for Leaving _____	Employed From _____ Beginning Hourly Pay Rate/Salary _____	To _____ Ending Hourly Pay Rate/Salary _____	Summarize the nature of the work performed and job responsibilities _____ _____ _____
Employer _____ Telephone _____ Address _____ _____ Job Title _____ Immediate Supervisor and Title _____ Reason for Leaving _____	Employed From _____ Beginning Hourly Pay Rate/Salary _____	To _____ Ending Hourly Pay Rate/Salary _____	Summarize the nature of the work performed and job responsibilities _____ _____ _____
Employer _____ Telephone _____ Address _____ _____ Job Title _____ Immediate Supervisor and Title _____ Reason for Leaving _____	Employed From _____ Beginning Hourly Pay Rate/Salary _____	To _____ Ending Hourly Pay Rate/Salary _____	Summarize the nature of the work performed and job responsibilities _____ _____ _____
Employer _____ Telephone _____ Address _____ _____ Job Title _____ Immediate Supervisor and Title _____ Reason For Leaving _____	Employed From _____ Beginning Hourly Pay Rate/Salary _____	To _____ Ending Hourly Pay Rate/Salary _____	Summarize the nature of the work performed and job responsibilities _____ _____ _____

Skills and Qualifications - Summarize any special training, skills, licenses, certificates and/or characteristics of yourself that

may qualify you as being able to perform job-related functions in the position for which you are

applying _____

Educational Background (if job-related)

Name and Location	Years Completed	Did You Graduate?	Course of Study/Degree
High School			
College			
Other			

References

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Telephone	Years Known

It is understood and agreed upon that any misrepresentation by me on this application may result in cancellation of this application and/or separation from the employer's service if I have been employed.

I hereby authorize the prospective employer to investigate the accuracy of the information submitted on this application, my resume, or any other information I provide. I release the employer and its representative(s) from all claims and liabilities of any nature arising from seeking such information and all other persons, corporations or organizations for furnishing such information.

This application for employment shall be considered active for a period of time not to exceed 45 days. At the conclusion of this time, if I wish to be considered for employment, it will be necessary to fill out a new application.

I understand and acknowledge that, if employed by this employer, unless otherwise defined by applicable law, any employment relationship with this employer is of an "at will" nature, which means that I may resign at any time and the employer may discharge me at any time for any reason or for no reason. I understand that no representative of the employer has the authority to make any assurances to the contrary, written or otherwise.

If employed, I understand that my failure to provide the employer with proof of legality of residence or citizenship may result in my termination. I understand that nothing contained in this application or in the granting of an interview is intended to create a contract between me and this employer for either employment or the provision of any benefits. If employed, I agree to abide by the employer's policies and procedures.

The employer desires to maintain a drug-free work environment. I understand that I may be required to undergo drug testing prior to employment and at random intervals during employment, if employed. Being under the influence of drugs or alcohol while in the workplace or my use of illegal drugs may result in immediate termination.

I consent to being fingerprinted and to the employer having a criminal background check performed on me if employed.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no question in this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

I represent that I have read and fully understand the foregoing and seek employment under these conditions.

Applicant's

Signature _____ Date _____