

# APPLICATION FOR EMPLOYMENT

VINTON CONSTRUCTION CO.  
2705 N. Rapids Rd.  
P.O. Box 1987  
Manitowoc, WI 54221-1987

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

(PLEASE PRINT)

|                         |                     |
|-------------------------|---------------------|
| Position(s) Applied For | Date of Application |
|-------------------------|---------------------|

How Did You Learn About Us?

Advertisement       Relative       Inquiry  
 Employment Agency       Friend       Other \_\_\_\_\_

|                     |                                    |             |
|---------------------|------------------------------------|-------------|
| Last Name           | First Name                         | Middle Name |
| Address             | Number                             | Street      |
|                     | City                               | State       |
|                     | Zip Code                           |             |
| Telephone Number(s) | Social Security Number (Voluntary) |             |

Best time to contact you at home is: \_\_\_\_\_:\_\_\_\_\_ <sup>AM</sup>/<sub>PM</sub>

If you are under 18 years of age, can you provide required proof of your eligibility to work?  Yes  No

Have you ever filed an application with us before? .....  Yes  No  
 ..... If Yes, give date \_\_\_\_\_

Have you ever been employed with us before?.....  Yes  No  
 If Yes, give date \_\_\_\_\_

Do any of your friends or relatives, other than spouse, work here? .....  Yes  No

Are you currently employed? .....  Yes  No

May we contact your present employer? .....  Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  
*Proof of citizenship or immigration status will be required upon employment. ....*  Yes  No

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 Mornings Afternoon Evenings)  
     Temporary      (please indicate dates available \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_)

Are you currently on "lay-off" status and subject to recall? .....  Yes  No

Can you travel if a job requires it? .....  Yes  No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER



# EMPLOYMENT 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.

|    |                     |                    |       |                |
|----|---------------------|--------------------|-------|----------------|
| 1. | Employer            | Dates Employed     |       | Work Performed |
|    |                     | From               | To    |                |
|    | Address             |                    |       |                |
|    | Telephone Number(s) | Hourly Rate/Salary |       |                |
|    |                     | Starting           | Final |                |
|    | Job Title           | Supervisor         |       |                |
|    | Reason for Leaving  |                    |       |                |
| 2. | Employer            | Dates Employed     |       | Work Performed |
|    |                     | From               | To    |                |
|    | Address             |                    |       |                |
|    | Telephone Number(s) | Hourly Rate/Salary |       |                |
|    |                     | Starting           | Final |                |
|    | Job Title           | Supervisor         |       |                |
|    | Reason for Leaving  |                    |       |                |
| 3. | Employer            | Dates Employed     |       | Work Performed |
|    |                     | From               | To    |                |
|    | Address             |                    |       |                |
|    | Telephone Number(s) | Hourly Rate/Salary |       |                |
|    |                     | Starting           | Final |                |
|    | Job Title           | Supervisor         |       |                |
|    | Reason for Leaving  |                    |       |                |
| 4. | Employer            | Dates Employed     |       | Work Performed |
|    |                     | From               | To    |                |
|    | Address             |                    |       |                |
|    | Telephone Number(s) | Hourly Rate/Salary |       |                |
|    |                     | Starting           | Final |                |
|    | Job Title           | Supervisor         |       |                |
|    | Reason for Leaving  |                    |       |                |

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

---



---



---



---



---

# ADDITIONAL INFORMATION

## Other Qualifications

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

---



---



---



---

## SPECIALIZED SKILLS (CHECK SKILLS/EQUIPMENT OPERATED)

|                                     |  |                                       |              |
|-------------------------------------|--|---------------------------------------|--------------|
| <input type="checkbox"/> Terminal   | <input type="checkbox"/> Spreadsheet     | Production/Mobile<br>Machinery (list) | Other (list) |
| <input type="checkbox"/> PC/MAC     | <input type="checkbox"/> Word Processing | _____                                 | _____        |
| <input type="checkbox"/> Typewriter | <input type="checkbox"/> Shorthand       | _____                                 | _____        |
| WPM _____                           | WPM _____                                | _____                                 | _____        |

*State any additional information you feel may be helpful to us in considering your application.*

---



---



---



---

**Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation?       YES     NO

## REFERENCES

1. \_\_\_\_\_ (Name) \_\_\_\_\_ ( ) \_\_\_\_\_ Phone #  
 \_\_\_\_\_ (Address)
2. \_\_\_\_\_ (Name) \_\_\_\_\_ ( ) \_\_\_\_\_ Phone #  
 \_\_\_\_\_ (Address)
3. \_\_\_\_\_ (Name) \_\_\_\_\_ ( ) \_\_\_\_\_ Phone #  
 \_\_\_\_\_ (Address)

# 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.

In the event of employment, I understand that false or misleading information given in my application or interview(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

## FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview  Yes  No

Remarks \_\_\_\_\_

\_\_\_\_\_  
INTERVIEWER      DATE

Employed  Yes  No      Date of Employment \_\_\_\_\_

Job Title \_\_\_\_\_ Hourly Rate/  
Salary \_\_\_\_\_ Department \_\_\_\_\_

By \_\_\_\_\_

NAME AND TITLE

DATE

This Application For Employment is sold for general use throughout the United States. Amsterdam Printing assumes no responsibility for the use of said form or any questions which, when asked by the employer of the job applicant, may violate State and/or Federal Law.



FOR PERSONNEL DEPARTMENT USE ONLY

Position(s) Applied For Is Open:  Yes  No

Position(s) Considered For: \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

NAME: \_\_\_\_\_

POSITION: \_\_\_\_\_

DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

# Employment Data Record

Employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap, or any other legally protected status.

As an employer with an Affirmative Action Program, we comply with government regulations, including Affirmative Action responsibilities where they apply.

The purpose for this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic reports are made to the government on the following information. The completion of the Data Records optional. If you choose to volunteer the requested information please note that all Data Records are kept in a Confidential File and are not a part of your Application for Employment or personnel file. Please note: YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.

## VOLUNTARY SURVEY

(Please Print)

Date \_\_\_\_\_

Government agencies at times require periodic reports on the sex, ethnicity, handicap, veteran and other protected status of employees. This data is for statistical analysis with respect to the success of the Affirmative Action program. SUBMISSION OF THIS INFORMATION IS VOLUNTARY.

|                     |       |     |
|---------------------|-------|-----|
| Name                |       |     |
| Address             |       |     |
| City                | State | Zip |
| Social Security No. |       |     |

FOR POST HIRE USE ONLY

| <input checked="" type="checkbox"/> Complete Only the Sections Below That Have Been Checked |   |
|---|---|
|   | Current Job   |
|   | Check One: <input type="checkbox"/> Male <input type="checkbox"/> Female  |
|   | Check One of the Following: (Ethnic Origin)   |
|   | <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native<br><input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Asian/Pacific Islander |
|   | Check If any of the Following are Applicable  |
|   | <input type="checkbox"/> Vietnam Era Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Handicapped Individual  |
|   | Birth Date  |

Vinton Construction Company  
 P.O. Box 1987  
 2705 North Rapids Road • Manitowoc, WI 54221-1987