

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, color, religion, sex, age, national origin, disability, marital status, or any other legally protected category which the company is obligated to recognize.



LOEGERING MFG. INC.

15514 37TH ST. SE
 CASSELTON, ND 58012
 PHONE: (701) 347-5441
 FAX: (701) 347-4323

HR USE ONLY

applicant # _____
 date rec. _____
 purge date _____

PERSONAL

Application should be fully completed for consideration

First Name	Middle Initial	Last Name	Date
Street Address			Home Phone Business Phone
City	State	Zip	Social Security No.
How long at present address?			Position Desired?
Have you ever applied for employment with us? ____yes (month/year) ____no			Pay Expected
Are you available for full-time work? ____yes (If yes, when available) ____no (if no, what hours available)?			Will you work overtime if asked?
Do you have relatives working at Loeering Mfg. Inc.? ____yes (if yes, who?) ____no			Have you worked here before? (last year)
Have you ever been convicted of a felony or gross misdemeanor within the past five years? (Past conviction is not an absolute bar to employment.) ____yes ____no			If hired, can you provide evidence that you are authorized to work in the US? ____yes ____no
How did you learn of our organization? _____Job Service _____Know Employee of Company _____Forum _____Other Newspaper (please list _____) _____College Placement Office _____Other (please list _____)			

EDUCATION

School	School Name & Location	Course Of Study	No. Of Years	Did You Graduate?	Degree\ Diploma
College					
Business or Trade					
High School					
Other					

Why would Loeering benefit from hiring you?

What would you benefit from Loeering?

EMPLOYMENT RECORD

Please give accurate, complete full-time and part-time employment record for your last 4 employers. Start with most recent position/employer.

Company Name		Telephone
Address, City, State, Zip		Employed: From _____ To _____
Name and Title of Supervisor	State Your Job Title	Salary: Start _____ Last _____
Describe Your Job Responsibilities		Reasons for Leaving

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Address, City, State, Zip		Employed: From _____ To _____
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Address, City, State, Zip		Employed: From _____ To _____
Name and Title of Supervisor	State Your Job Title	Salary: Start _____ Last _____
Describe Your Job Responsibilities		Reasons for Leaving

I certify that the answers given herein (and in the accompanying resume, if any) are true and complete to the best of my knowledge and that I have not omitted any information. I further understand that false, misleading, or omitted information in my application form, interview (s) or resume (if any) may disqualify me from further consideration for employment or result in immediate discharge, if discovered at a later date. I also understand that Loegering Mfg. Inc. reserves the right to withdraw any job offer at any time with or without notice. I understand and agree that all information furnished on this application can be verified by Loegering Mfg. Inc. or its authorized representative. I hereby authorize all individuals and organizations named or referred to in this application and any law enforcement organization or credit bureau to give Loegering Mfg. Inc. all information, relative to such verification and hereby release such individuals, organizations, and Loegering Mfg. Inc. from any and all liability for any claim or damage resulting therefrom. I understand that neither this document nor any offer of employment from Loegering Mfg. Inc. constitutes an employment contract. If employed by the company, I understand that my status is that of an at-will employee who can quit or be terminated from work at any time for any reason with or without notice, except as otherwise provided by law.

Date: _____ Signature: _____