

Application for Employment

Columbus Corporation is an equal employment opportunity employer and will not discriminate against any applicant or employee on any grounds protected under federal, state or local law. Those applicants requiring reasonable accommodation in the application and/or interview process should notify the General Manager

Conditions of employment are stated at the end of this form. Please read carefully before you sign this application.

Application must be completed in full even if attaching a resume.

Position(s) Applied For: _____ Date Applied: _____

Wage Expected: _____ Date Available: _____

PERSONAL	Name (First, Middle, Last)		Email Address:	Social Security #	
	Present Street Address		City, State, Zip	Home Phone #	
	Alternative Way We May Contact You?		How did you learn about this job opportunity? (If referred by current employee, list name.)		
	If under 18, can you supply working papers? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Newspaper <input type="checkbox"/> College/Career Fair <input type="checkbox"/> Employment Agency <input type="checkbox"/> Radio <input type="checkbox"/> Website <input type="checkbox"/> Friend <input type="checkbox"/> Other _____		
	Are you legally eligible to work in the U.S.? (Proof required upon employment.) <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a relative working for the company? (If yes, give name(s) & relationship) <input type="checkbox"/> Yes <input type="checkbox"/> No _____		
	Have you ever been convicted of a felony? (A conviction will not necessarily be a bar to employment. Notice to applicants in IL: Under IL law, an applicant is not obligated to disclose sealed or expunged records of conviction or arrest.) <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____				
	Have you ever been discharged from any employment or asked to resign? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____				

JOB OBJECTIVE	Have you ever worked for our company or its affiliated companies before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Company Name: _____	Location: _____
	Date of Employment: _____	Position Held: _____
Have you ever applied with our company or its affiliated companies before? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Company Name: _____	Location: _____	
Position(s) applied for: _____	Mo/Yr Applied: _____	
Is there any condition which would prevent you from performing the essential functions of the position applied for with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please explain: _____		

AVAILABILITY

Please indicate schedule availability:

- I am available and desire to work FULL-TIME (minimum 40 hours).
- I am available and desire to work PART-TIME.

Available Hours: _____ Available Days: _____

- I am willing to work overtime if asked.

Shift Availability: 1st 2nd 3rd

**PLEASE BEGIN WITH YOUR CURRENT OR MOST RECENT EMPLOYMENT
(Must be completed even if attaching a resume)**

EMPLOYMENT HISTORY

1.	Employer	Dates Employed From ___/___/___ To ___/___/___	Work Performed
	Address	Base Pay Start \$ Final \$	
	Telephone #	Job Title	
	Supervisor	Reason for job change?	
	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list reason:		
Explain any period between jobs longer than 30 days.			

2.	Employer	Dates Employed From ___/___/___ To ___/___/___	Work Performed
	Address	Base Pay Start \$ Final \$	
	Telephone #	Job Title	
	Supervisor	Reason for job change?	
	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list reason:		
Explain any period between jobs longer than 30 days.			

3.	Employer	Dates Employed From ___/___/___ To ___/___/___	Work Performed
	Address	Base Pay Start \$ Final \$	
	Telephone #	Job Title	
	Supervisor	Reason for job change?	
	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, list reason:		
Explain any period between jobs longer than 30 days.			

E D U C A T I O N	Type of School	Name of School	Major/Subject	Circle Last Yr Attended	Graduated	Degree
	High School			9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Currently Enrolled	
	College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Currently Enrolled	
	College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Currently Enrolled	
	Graduate College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Currently Enrolled	
	Business, Trade, Other			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Currently Enrolled	

ADDITIONAL EXPERIENCE OR QUALIFICATIONS

List any other experience, skills, qualifications or prior military service which you would like considered in connection with your application of employment.

REFERENCES (Exclude relatives)

1. Name	Phone #	How does this person know you?
2. Name	Phone #	How does this person know you?
3. Name	Phone #	How does this person know you?

PLEASE READ CAREFULLY APPLICANT'S CERTIFICATION AND AGREEMENT

By my signature below, I promise that the information provided in this employment application (and in any related document or interview) is true and complete. I understand that any false or misleading information or significant omissions may disqualify me from further consideration for employment, and may lead to my dismissal from employment, if discovered at a later date.

I expressly authorize investigation by Columbus Corporation, its agents and representatives of all statements, references, and information provided in this application (or in any related documents or interview). I expressly authorize any person, school, current or prior employer named in this form (or in any related documents or interview) to provide any information or opinion requested by Columbus Corporation, its agents and representatives in connection with my application and release all parties from liability in making such statements.

I understand that this application does not create a contract for employment.

I understand that if hired I am obliged to comply with any and all current and subsequently adopted company policies. I also understand that if I am employed I will be required to provide satisfactory proof of identification and legal work authorization within three days of being hired. Failure to submit sufficient proof within the required time shall result in immediate termination of employment.

I understand and agree that if hired my employment is for no definite period and may be terminated at any time, at the will of either party with or without cause and with or without prior notice.

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

Applicant's Signature _____ Date _____