

Northern Iowa Die Casting

APPLICATION FOR EMPLOYMENT

EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, creed, religion, sex, age national origin, physical or mental handicap, veterans' status, or any other legally protected status.

Northern Iowa Die Casting requires a pre-employment drug test

Today's Date: _____	
Name	
<small>Last</small>	<small>First</small>
<small>Middle Initial</small>	
Social Security No.	
Address	
<small>Street or Box</small>	
<small>City</small>	<small>State</small>
<small>Zip Code</small>	
Home Phone	
Cell phone	
Are you legally eligible for employment in the U.S.A.? Yes No () ()	
Are you at least 18 years of age?	
Position you are applying for:	
Are you available to work: () Full Time () Part Time	Shift you are applying for... () 7AM - 3:15 PM () 3 PM - 11:15 PM () 11 PM - 7:15 AM
Please circle any day(s) that you would be UNABLE to work on a regular basis.	
MON	TUE
WED	THRU
FRI	SAT
SUN	
Date available to work:	Rate of pay expected:
Have you been convicted of a crime? () Yes () No <small>(A Conviction will not necessarily disqualify an applicant.)</small>	
If yes, describe in full.	
Have you previously applied or been employed at Northern Iowa Die Casting? () Yes () No	
If yes, under what name?	
When?	What Department?
Reason for leaving:	
Do you have any relatives employed at Northern Iowa Die Casting? <small>(If yes, please list their names and their relationship to you.)</small>	
Name	Relationship
How were you referred to NIDC? (check one) Newspaper ad _____ Friend _____	
Current employee, if yes name _____	

Education and Training

Circle the highest grade completed: 6 7 8 9 10 11 12 GED College 1 2 3 4

List the name and location of schools that you have attended...

High School _____
 College/University _____
 Vocation/Technical _____

EMPLOYMENT Please give accurate, complete full - time and part - time employment record.
Start with present or most recent employer and list all employment in the last 5 years.

Date: Month and Year	Employer, Job Title, Duties, and Equipment used	Supervisor's Name	Reason for leaving
From			
To			
From			
To			
From			
To			
From			
To			

MILITARY SERVICE RECORD

Branch of Service: _____ Rank at Discharge: _____
 Duties: _____
 Were you honorably discharged? () Yes () No If no, explain: _____

SKILLS AND EXPERIENCE

Please list any skills or experience or licencing that you have relevant to the position you are applying: (welding, power tools, office machines, EMT/CPR training)

Please list any additional languages (other than English) you speak:

Agreement:

I certify that the answers given by me for the foregoing questions and statements are true and correct without omission of any kind whatsoever, and I hereby grant Northern Iowa Die Casting permission to verify such answers.

I understand that any false or misleading information furnished by me relative to this application for employment shall be considered rejection of my application for further consideration of employment or sufficient cause for dismissal of employment if such false statement(s) is discovered subsequent to my employment.

I agree that the employer, NIDC, shall not be liable in any respect if my employment is terminated because of falsification of statements, answers, or omissions made by me in this application.

 Signature of Applicant Date