

# APPLICATION FOR EMPLOYMENT



Machining | Fabrication | Welding | Powder Coating

## CONTACT INFORMATION

Instructions: Please print and fill out all sections. Be sure to sign and date the application.

**NAME:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP CODE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **PHONE 2:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

## EMPLOYMENT INFORMATION

**POSITION APPLYING FOR:** \_\_\_\_\_

**ARE YOU CURRENTLY EMPLOYED?** YES or NO

**MAY WE CONTACT YOUR PRESENT EMPLOYER?** YES or NO

**WOULD YOU ACCEPT: FULL TIME WORK** YES or NO

PART TIME YES or NO

**WORK DATE AVAILABLE:** \_\_\_\_\_

**ARE YOU WILLING TO WORK?**

**WEEKENDS:** YES or NO **OVERTIME:** YES or NO

**ARE YOU AVAILABLE TO WORK?**

**DAYS:** YES or NO **EVENINGS:** YES or NO

**NIGHTS:** YES or NO

**ARE YOU AT LEAST 18 YEARS OF AGE AND LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.?**

YES or NO

WHAT IS YOUR PRIMARY REASON FOR SEEKING EMPLOYMENT WITH ASHLAND TECHNOLOGIES?

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WHY DO YOU FEEL YOU WOULD BE AN ASSET TO THIS COMPANY?

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SPECIAL TRAINING OR SKILLS APPLICABLE TO POSITION:

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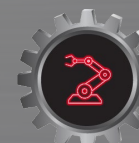
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**Ashland Technologies, Inc.**

218 Dell Rd. Hegins, PA 17938

(570)682-0933



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## PREVIOUS EMPLOYMENT HISTORY (LIST THE MOST RECENT FIRST-ATTACH A RESUME IF AVAILABLE)

Name of Employer		Telephone Number	
Address (Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/Day/Year	To Month/Day/Year	Rate of Pay Beginning	Final
Describe the Duties and Work Performed			
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Name of Employer		Telephone Number	
Address (Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/Day/Year	To Month/Day/Year	Rate of Pay Beginning	Final
Describe the Duties and Work Performed			
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Name of Employer		Telephone Number	
Address (Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/Day/Year	To Month/Day/Year	Rate of Pay Beginning	Final
Describe Position and Work Performed			
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## EDUCATION OR TRAINING

School	Name and Location of School	Course of Study	Years Completed	Diploma, Certificate or Degree
High School				
Vocational or Trade School				
College				
Other Training or Schooling				



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## **EMPLOYER'S STATEMENT**

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT, BUT MERELY IS INTENDED TO EVALUATE SUITABILITY FOR EMPLOYMENT. IT IS OUR POLICY TO CONSIDER ALL QUALIFIED PERSONS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, NATIONAL ORIGIN OR ANCESTRY, AGE (40 OR OVER), DISABILITY, GENETIC INFORMATION, MARITAL OR VETERAN STATUS, OR ANY OTHER LEGALLY PROTECTED STATUS UNDER LOCAL, STATE, OR FEDERAL LAW.

IF A JOB OFFER IS MADE, EMPLOYMENT MAY BE CONTINGENT UPON THE SUCCESSFUL COMPLETION AND PASSAGE OF A MEDICAL EXAMINATION, WHICH MAY INCLUDE PROVIDING BODY SUBSTANCE (BLOOD, URINE AND/OR HAIR) SAMPLES. WE ARE AN "AT-WILL," EQUAL OPPORTUNITY EMPLOYER. THIS APPLICATION WILL REMAIN ACITVE FOR 365 DAYS FROM DATE SIGNED.

## **APPLICANT'S STATEMENT**

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND AND ACKNOWLEDGE THAT MY EMPLOYMENT RELATIONSHIP WITH THIS COMPANY WOULD BE OF AN "AT-WILL" NATURE. I AM FREE TO RESIGN AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE, AND THE EMPLOYER RESERVES THE SAME RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE, EXCEPT AS REQUIRED BY LAW. THIS APPLICATION DOES NOT CONSTITUTE AN AGREEMENT OR CONTRACT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OR DEFINITE DURATION.

I UNDERSTAND THAT IF I AM HIRED, ANY FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATIONS OR INTERVIEW(S) MAY RESULT IN DISCHARGE FROM THE COMPANY. I UNDERSTAND, ALSO, THAT I AM REQUIRED TO ADIBE BY ALL CURRENT AND FUTURE RULES AND REGULATIONS OF THE EMPLOYER.

IF HIRED, I ALSO UNDERSTAND THAT I AM REQUIRED TO PROVIDE PROOF OF IDENTITY AND LEGAL WORK AUTHORIZATION.

I AGREE, IF GIVEN A CONDITIONAL JOB OFFER, TO SUBMIT TO A PRE-EMPLOYMENT MEDICAL EXAMINATION AND/OR DRUG TESTING, AND UNDERSTAND THAT I MUST MEET THE QUALIFICATIONS (PHYSICAL AND MENTAL) FOR THE POSITION, WITH OR WITHOUT REASONABLE ACCOMMODATION IN ORDER TO BEGIN EMPLOYMENT.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

### **FOR EMPLOYER USE ONLY**

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Hired: Yes or No

Start Date: \_\_\_\_\_ Position: \_\_\_\_\_ Wage: \_\_\_\_\_



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