SUPERB Industries, Inc. Employment Application

SUPERB Industries, Inc. is an equal opportunity employer and does not discriminate against applicants or employees on the basis of sex, race, color, religion, national origin, ancestry or age (40 years of age and over). In addition, SUPERB Industries, Inc. does not discriminate against qualified individuals with disabilities.

PLEASE PRINT

Address		City	Social Sec. No						
Tel (Home)		City							
				St	Zip				
D (C (a)		(Cell)	Er	mail					
Position(s) applying	g for								
Date available to st	art	Are	e you employed now?	□ Yes □	No				
Are you over 18 yea	ars of age?	Yes □ No Referred	d by:						
Have you ever appl	lied to work with	us before? ☐ Yes	□ No If yes, when?						
If hired, proof of your identity and employment eligibility in the United States must be established by appropriat documentation at the time you begin work at SUPERB Industries, Inc.									
Any offer of employment is conditional upon the results of a medical exam and drug test.									
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<u>tion</u>									
Name and	<u>Address</u>	<u>Number</u>	of years completed	<u>Major</u>	<u>Graduated</u>				
nool					□ Yes □ No				
					Pes D No				
pecify)					Pes D No				
ilitary Service									
		Highest Rank achie	eved						
Service	to	Duties							
	Are you over 18 year Have you ever been f yes, please explant Have you ever apply f hired, proof of you documentation at the Any offer of employ are you willing to ware you have access f no, please explaint tion Name and mool pecify) ilitary Service	Are you over 18 years of age? Have you ever been convicted of a f yes, please explain Have you ever applied to work with f hired, proof of your identity and edocumentation at the time you begin Any offer of employment is condition Are you willing to work an irregular some Yes No If no, please of no, please explain. Name and Address Nool Name and Address The pecify of the your identity and the time you begin and the time you be	Are you over 18 years of age?	Are you over 18 years of age?	Any offer of employment is conditional upon the results of a medical exam and drug test. Are you willing to work an irregular schedule, overtime, on different shifts, and on weekends Yes No If no, please explain: Do you have access to adequate transportation to travel to and from work? The no, please explain. Name and Address Number of years completed Major Major Major Major Major Major Major				

Employment History (most recent first)

	ı				T	,		
Date (from-to) Employe	er's Name and Ac	ddress	Position Held	Salary/Wage	Reason for leaving		
In Case of E	mergency	Notify:						
Telephone		Addres	SS					
Relationship								
Other Exper	ience or C	ualification:						
		orate on duties asso	ciated with po	sitions listed above	.)			
Certification	and Auth	<u>orization – Plea</u>	se read the	<u>oughtfully</u>				
relying on the a information pro information comprovide information, mis result in immed regardless of that the will of either the comprovide information in the comprovide information provide information comprovide information comprovide information information provide information comprovide information information provide information comprovide information inform	accuracy of to vided herein acerning me to ation about srepresentation in the dismissance date of payher myself of vided her myself of vided herein according to the vided herein accordin	the information proving and I authorize for SUPERB Industriume in response to on or omission of rul. I understand and ment of wages, being SUPERB Industries.	vided. I author primer employ ies, Inc. I also inquiries surequested fact agree that, if terminated at es, Inc. I also	orize SUPERB Induers, educational inso authorize SUPER bsequent to my es may result in delibried; my employmany time without prunderstand and ag	ustries, Inc. to vestitutions and created Industries, Incomployment if his nial of employment will be for no revious notice an gree that no one	JPERB Industries, Inc. is erify the accuracy of the edit agencies to release to to give references and red. I understand that ent or, if employed, may definite period and may, d with or without reason, has authority to promise greement signed by both		
Signature of Ap	plicant			Date				
Interviewed By Remarks:				Date				
Neatness:			Ability					
Hired: ☐ Yes	□ No	Position		Dept.				
Salary/ Wage		Date reporti	ing to work	-				
Approved: 1	Employment Manager Dept. Head General Manager							