

## Application for Employment

Applicant Name:			
Received By:			
Date Received:			

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical or mental disability, severe/morbid obesity, medical condition, military or veteran status, genetic information marital status, ethnicity, alienage or any other protected classification, in accordance with applicable federal, state, and local laws. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of Haaker Equipment Company, its clients, and its employees. Equal access to programs, services, and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative.

Position(s) Desired:		
Last Name	First Name	Middle Name
Address	City	State, Zip Code
Email Address		Nickname
Home Phone #	Cell Ph	none #
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Please list the names or your present or previous employers in chronological order with the present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. [Add additional page if necessary]

Name and Address of Employer	Dates Employed		Supervisor and Telephone Number
	From Month/Year To Month/Year		
			May we contact?
Job Title and Duties			Reason for Leaving

Name and Address of Employer	Dates Employed		Supervisor and Telephone Number
	From Month/Year	To Month/Year	•
			May we contact?
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Job Title and	Duties		Reason for Leaving
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	From Month/Year	To Month/Year	
			May we contact?
Job Title and Duties		Reason for Leaving	

Have you ever been involuntarily terminated or asked to resign from any job? Yes No						
If yes, please explain:						
Please explain any ga	ps in your emp	loyment history	:			
Please list any other e				, or other qualifications		
that you believe shoul	id be considere	u iii cvaiuatiiig	your quanneations	ioi employment.		
		EDUCATIO	ON			
Please describe your educational background in the table provided below.						
School Name	Years Completed	Diploma/Degree (yes / no)	Describe Course of Study or Major	Describe Specialized Training, Experience, Skills and Extra- Curricular Activates		
High School:						
College/University:						
College/University:						
Graduate/Professional:						

Trade or Correspondence:

Other:					
	BUSINESS	/PROFESSION	IAL REFERENCES		
Please list three profess	sional references o	of individuals wh	no are not related to y	ou.	
Name & T	Name & Title Business Relationship Telephone Number o				
	CO-	WORKER REI	FERENCES		
Please list three people relatives.	you have worked	with who know	you well; do not incl	ude personal friends or	
Name & Title  Relationship & Number  Of Years Acquainted  Telephone Number or Email					
Name & T	Title		_	Telephone Number or Email	
Name & T	Title		_	Telephone Number or Email	
Name & T	Title		_	Telephone Number or Email	
Name & T	Title		_	Telephone Number or Email	
Name & T	Title		_	Telephone Number or Email	
Name & T			ars Acquainted	Telephone Number or Email	
Have you ever worked	GE for this company	NERAL INFOI	RMATION		
Have you ever worked to If yes, please	GE for this company give dates and po	NERAL INFOI	RMATION	Tyes No	
Have you ever worked to If yes, please Do you have friends and	GE for this company give dates and po	NERAL INFOI	RMATION		
Have you ever worked to If yes, please Do you have friends and	GE for this company give dates and po d/or relative work (s) and relationsh	NERAL INFOI before? sition: king for this con ip(s):	RMATION		

If hired, would you have a reliable means of transportation to and from work? Yes No
Can you travel if the position requires it?
Can you relocate if the position requires it?
Are you at least 18 years old?
If hired, can you present evidence of your identity and legal right to live and work in
this country?
Are you able to perform the essential job functions of the job for which you are
applying with or without reasonable accommodation?
Note: Haaker Equipment Company complies with ADA and considers reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.
APPLICANT STATEMENT AND AGREEMENT
Please read and initial each paragraph below. If there is anything that you do not understand, please ask.
I hereby authorize Haaker Equipment Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to Haaker Equipment Company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition I hereby release Haaker Equipment Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
In the event of my employment with Haaker Equipment Company, I understand that I am required to comply with all rules and regulations of Haaker Equipment Company.
If hired, I understand and agree that my employment with Haaker Equipment Company is at-will, and that neither I, nor Haaker Equipment Company is required to continue the employment relationship for any specific term. I further understand that Haaker Equipment Company or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.
I understand that safety of employees is extremely important to Haaker Equipment Company and that the company is committed to ensuring a safe work environment. I understand that I, and every employee, have a responsibility to prevent accidents and nijuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state and local regulations related to on-the-job safety and health.
I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if am employed, regardless of the time elapsed before discovery.
I understand that if I am selected to hire, it will be necessary for me to provide satisfactory evidence of my identity and egal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.
I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed and the remainder of this Agreement shall be enforceable.  MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO ALL OF THE ABOVE TERMS.  Please Print, Sign and Return a Hard Copy of This Application to the Office
Printed Name:
Signature:
Date:

## DRUG SCREENING WAIVER FROM

As a condition of employment with Haaker Equipment Company, I voluntarily agree to submit to a drug screen for the detection of drugs. I understand and agree that the results of this screening will be released to Haaker Equipment Company. The results will be used consistent with Haaker Equipment Company's policy regarding employee illicit drug use, which I received and signed as an indication of my understanding and acceptance thereof. I understand these results are kept confidential.

Employee/Applicant Name:	
Employee/Applicant Signature:	
Date:	