

Application For Employment



We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For		Date of Application	
How Did You Learn About Us?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In	
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	
Last Name		First Name	Middle Name
Address	Number	Street	City
		State	Zip Code
Telephone Number(s)		Social Security Number	

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

If Yes, give date _____

Have you ever been employed with us before? Yes No

If Yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No
Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years? Yes No
Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
			Starting	Final
	Job Title	Supervisor		
	Reason for Leaving			
2.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
			Starting	Final
	Job Title	Supervisor		
	Reason for Leaving			
3.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
			Starting	Final
	Job Title	Supervisor		
	Reason for Leaving			
4.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
			Starting	Final
	Job Title	Supervisor		
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills Check Skills/Equipment Operated

<input type="checkbox"/> CRT	<input type="checkbox"/> Fax	Production/Mobile Machinery (list):	Other (list):
<input type="checkbox"/> PC	<input type="checkbox"/> Lotus 1-2-3	_____	_____
<input type="checkbox"/> Calculator	<input type="checkbox"/> PBX System	_____	_____
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Wordperfect	_____	_____

State any additional information you feel may be helpful to us in considering your application.

REQ'D WAGES \$ _____ / HR.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

YES NO

References

- _____ () _____
 (Name) Phone #

_____ (Address)
- _____ () _____
 (Name) Phone #

_____ (Address)
- _____ () _____
 (Name) Phone #

_____ (Address)

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read and / or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

Foreman

Your Qualifications

1 Tell us about educational courses you have taken and how they relate to the position you applied for.

2 What was your most significant work experience?

3. Have you ever supervised anyone? Describe your experience.

4 Have you participated in any volunteer or community work?

5 Why are you interested in working for Avant?

6 Are you willing to work overtime? What kinds of work hours are you looking for?

7. What skills do you have that make you qualified for this position?

8. What have you accomplished previously that shows you will be successful here?

9. Describe some critical on-site decisions you have made in past occupations?

10. What are your long-range career goals? Where do you want to be in 5 years?

11 Describe your leadership skills.

12. Describe your computer skills?

13. What are your strengths and weaknesses?

Please check the box that applies to you the most

	Novice	Average	Mastered				
Bobcats				Novice - Under 50 hours			
Hand Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Foot Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Attachments				Average 50+ Hours			
Rock Hound	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Auger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mastered 100+ Hours			
Snow Bucket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Grapple	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brick	Novice	Average	Mastered
Brush Hog	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Circle Packs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Quilting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Harley Rake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cutting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Land Plane	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Marking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tiller	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Layout	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hydro Breaker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Block			
Roller	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Keyed Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Seat Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MT-52 \ Dingo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Geogrid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Excavators				Dimensional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mini	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Firepit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fireplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rock Jaw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grill Surround	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Claw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pillars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Timber			
Thumb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tractors				Stone			
Manual Transmission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pattern Flag	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glide Point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blue Stone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Point Attachment use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Boulder Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rear Rolary Mowers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Quarystone Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Box Scrapers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ponds			
Tiller	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Broadcast Seeder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wetland Filters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brillion Seeder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Negative Edge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Small Engine				Biofalls/ Skimmer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brick Saws				Pondless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chop Slide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Large Scale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compactors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lighting			
Partner Saw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Troubleshooting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chain Saw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kichler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scag Mower	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nightscaping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timber Saw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FX Luminaire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Angle Grinder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Irrigation			
Gilotine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trucks				Rain Bird	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3/4 ton Dump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Irritrol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28,000 lb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Weathermatic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trailers				Watertronics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driving Combination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transit			
Backing w\ Trailer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Opitcal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Lazer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

INTERVIEWER DATE

Employed Yes No Date of Employment _____

Job Title _____ Hourly Rate/
Salary _____ Department _____

By _____
NAME AND TITLE DATE

NOTES

This Application For Employment is sold for general use throughout the United States. Amsterdam Printing and Litho Corp. assumes no responsibility for the use of said form or any questions which, when asked by the employer of the job applicant, may violate State and/or Federal Law.

