

KEROTEST MANUFACTURING CORP.

5500 Second Ave
Pittsburgh, PA 15207

7734 Highway 1
Mansura, LA 71350

EMPLOYMENT APPLICATION

PLEASE PRINT OR TYPE. ALL REQUESTED INFORMATION MUST BE COMPLETED.

PERSONAL

NAME: FIRST	MIDDLE	LAST	(AREA CODE) PHONE NUMBER
CURRENT MAILING ADDRESS (Street, City, State, Zip Code)			EMAIL ADDRESS REQUIRED
PERMANENT ADDRESS (IF DIFFERENT FROM ABOVE)			SOCIAL SECURITY NUMBER
ARE YOU OVER EIGHTEEN YEARS OF AGE?			YES NO
CAN YOU LEGALLY WORK IN THE U.S.?			YES NO
ARE YOU A U.S. CITIZEN?			YES NO

POSITION APPLYING FOR

FOR WHAT POSITION OR TYPE OF WORK ARE YOU APPLYING?	ARE YOU INTERESTED IN FULL-TIME TEMPORARY PART-TIME SUMMER
HAVE YOU EVER BEEN EMPLOYED AT KEROTEST MANUFACTURING CORP.? IF YES, PROVIDE DATES OF EMPLOYMENT	YES NO
HAVE YOU APPLIED AT KEROTEST IN THE LAST 6 MONTHS? IF YES, PROVIDE DATE	YES NO
WHO REFERRED YOU TO KEROTEST MANUFACTURING CORP.?	DATE AVAILABLE
LIST THE NAMES OF FRIENDS OR RELATIVES EMPLOYED BY KEROTEST	WHAT SHOP MACHINES HAVE YOU OPERATED, INDICATING TIME ON EACH
IF APPLYING FOR SHOP OR ASSEMBLY WORK, ARE YOU WILLING TO WORK NIGHTS?	YES NO
WILL YOU AGREE TO WEAR EARPLUGS, SAFETY GLASSES AND OTHER REQUIRED SAFETY APPAREL?	YES NO
IN THE PAST TWO YEARS, HAVE YOU COMPLIED WITH YOUR EMPLOYER'S ABSENTEE POLICY?	YES NO

TRAINING AND ACTIVITIES

WHAT EXPERIENCE OR TRAINING, INCLUDING MILITARY EXPERIENCE, HAVE YOU HAD WHICH WOULD HELP YOU IN THE POSITION FOR WHICH YOU ARE APPLYING?

LIST ANY ACTIVITIES AND OTHER INFORMATION YOU FEEL WOULD BE OF USE IN EVALUATING YOUR QUALIFICATIONS FOR THE POSITION YOU SEEK (I.E. PROFESSIONAL SOCIETIES, PATENTS, POSITIONS IN OUTSIDE ORGANIZATIONS.)
DO NOT LIST INFORMATION REVEALING RACE, CREED, COLOR, NATIONAL ORIGIN, SEX AND ANCESTRY.

EDUCATION
HIGH SCHOOL

NAME OF SCHOOL	ADDRESS (Street, City, State, Zip Code)	MAJOR COURSE	NUMBER OF YEARS	DID YOU GRADUATE? YES NO
				YES NO
				YES NO
				YES NO

COLLEGE, UNIVERSITY OR OTHER

NAME OF INSTITUTION	ADDRESS (Street, City, State, Zip Code)	NUMBER OF YEARS	DID YOU GRADUATE? YES NO
DEGREE GRANTED	MAJOR	GPA	IF YOU DID NOT COMPLETE, GIVE REASON
NAME OF INSTITUTION	ADDRESS (Street, City, State, Zip Code)	NUMBER OF YEARS	DID YOU GRADUATE? YES NO
DEGREE GRANTED	MAJOR	GPA	IF YOU DID NOT COMPLETE, GIVE REASON
NAME OF INSTITUTION	ADDRESS (Street, City, State, Zip Code)	NUMBER OF YEARS	DID YOU GRADUATE? YES NO
DEGREE GRANTED	MAJOR	GPA	IF YOU DID NOT COMPLETE, GIVE REASON

WORK REFERENCES (LIST PERSONAL REFERENCES ONLY IF YOU HAVE NO WORK REFERENCES)

WORK REFERENCE PERSONAL REFERENCE	NAME	OCCUPATION
ADDRESS (Street, City, State, Zip Code)	YEARS ACQUAINTED	TELEPHONE NUMBER (MUST INCLUDE)
WORK REFERENCE PERSONAL REFERENCE	NAME	OCCUPATION
ADDRESS (Street, City, State, Zip Code)	YEARS ACQUAINTED	TELEPHONE NUMBER (MUST INCLUDE)
WORK REFERENCE PERSONAL REFERENCE	NAME	OCCUPATION
ADDRESS (Street, City, State, Zip Code)	YEARS ACQUAINTED	TELEPHONE NUMBER (MUST INCLUDE)

EMPLOYMENT RECORD (INCLUDE PRESENT EMPLOYER AND THREE PREVIOUS EMPLOYERS)

PRESENTLY EMPLOYED? YES NO	MAY WE CONTACT YOUR PRESENT EMPLOYER YES NO	
PRESENT EMPLOYER		
EMPLOYER	ADDRESS (Street, City, State, Zip Code)	TELEPHONE NUMBER
JOB TITLE	DATES: FROM MO. YR TO MO. YR	SUPERVISOR'S NAME
BASE SALARY OR WAGE START _____ CURRENT OR END _____ DATE OF LAST INCREASE _____	NATURE OF DUTES	REASON FOR LEAVING OR SEEKING CHANGE OF POSITION
FIRST PREVIOUS EMPLOYER		
EMPLOYER	ADDRESS (Street, City, State, Zip Code)	TELEPHONE NUMBER
JOB TITLE	DATES: FROM MO. YR TO MO. YR	SUPERVISOR'S NAME
BASE SALARY OR WAGE START _____ CURRENT OR END _____ DATE OF LAST INCREASE _____	NATURE OF DUTES	REASON FOR LEAVING OR SEEKING CHANGE OF POSITION
SECOND PREVIOUS EMPLOYER		
EMPLOYER	ADDRESS (Street, City, State, Zip Code)	TELEPHONE NUMBER
JOB TITLE	DATES: FROM MO. YR TO MO. YR	SUPERVISOR'S NAME
BASE SALARY OR WAGE START _____ CURRENT OR END _____ DATE OF LAST INCREASE _____	NATURE OF DUTES	REASON FOR LEAVING OR SEEKING CHANGE OF POSITION
THIRD PREVIOUS EMPLOYER		
EMPLOYER	ADDRESS (Street, City, State, Zip Code)	TELEPHONE NUMBER
JOB TITLE	DATES: FROM MO. YR TO MO. YR	SUPERVISOR'S NAME
BASE SALARY OR WAGE START _____ CURRENT OR END _____ DATE OF LAST INCREASE _____	NATURE OF DUTES	REASON FOR LEAVING OR SEEKING CHANGE OF POSITION

CERTIFICATION

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS QUALIFICATION RECORD IF I AM CONSIDERED FOR EMPLOYMENT. THE COMPANIES OR PERSONS' NAMES HEREIN ARE AUTHORIZED TO GIVE INFORMATION REGARDING ME, WHETHER OR NOT SUCH INFORMATION IS PART OF THEIR RECORDS AND THEY ARE HEREBY RELEASED FROM ALL LIABILITY FOR ISSUING SUCH INFORMATION. I HEREBY WAIVE ANY PRIVILEGE I MIGHT HAVE AS TO SUCH INFORMATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR HEREIN WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF CONSIDERATION FOR EMPLOYMENT OR DISMISSAL FROM THIS COMPANY'S SERVICE IF I HAVE BEEN EMPLOYED.

DATE

APPLICANT'S SIGNATURE

IT IS UNDERSTOOD THAT YOU REMAIN FREE TO EXPLORE AND ACCEPT CAREER OPPORTUNITIES OUTSIDE KEROTEST AND THAT THE EMPLOYMENT RELATIONSHIP IS AT WILL AND MAY BE TERMINATED BY EITHER PARTY AT ANY TIME, WITH OR WITHOUT CAUSE OR NOTICE.

IN CASE OF EMERGENY NOTIFY (NAME, ADDRESS AND TELEPHONE NUMBER)

NAME

TELEPHONE NUMBER

STREET ADDRESS

CITY

STATE

ZIP CODE

KEROTEST MANUFACTURING CORP. IS AN AFFIRMATIVE ACTION AND EQUAL OPPORTUNITY EMPLOYER AND COMPLIES WITH VARIOUS FEDERAL, STATE AND LOCAL LAWS THAT PROHIBIT DISCRIMINATION ON ACCOUNT OF RACE, COLOR, RELIGION, SEX, AGE, NATIONAL ORIGIN, DISABILITY OR VETERAN'S STATUS.

07 2011