



Employment Application

DeFelsko Corporation is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, national origin, sex, age, disability, marital status and arrest and conviction records or any other protected classifications in accordance with all Federal, NY State and Local laws governing non-discrimination in employment.

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Personal Information

First Name	Middle Name	Last Name	
Street Address	City	State	Zip Code
Telephone Number	Daytime Telephone Number (if different than Telephone Number)		
Email Address			

Are you eighteen (18) years of age or older? Yes ___ No ___

Are you a U.S. Citizen or do you have a legal right to work in the U.S.? Yes ___ No ___

Have you ever been convicted of a crime? Yes ___ No ___

If "yes", please explain:

Have you ever been terminated from employment or asked to resign by an employer? Yes ___ No ___

If "yes", please explain:



Referral Source

How did you hear about DeFelsko Corporation? Please circle the number of the most appropriate response and provide any additional details.

- 1 College/University Name: _____
- 2 Recruiter or Agency Name: _____
- 3 Referred by Employee Name: _____
- 4 Advertisement in: _____
- 5 No Referral; Walk-in: _____
- 6 Worked at DeFelsko Previously (Dates, etc.): _____
- 7 Other: _____

Position Preferences

For which position are you applying? _____

Salary desired: \$ _____ per _____ (specify hour, week, or year)

Schedule desired: Full Time _____ Part Time _____ # of Hours per Week _____

Could you work overtime? Yes ___ No ___

What date could you start work? _____

Are you able to meet the attendance requirements of this position? Yes ___ No ___

Could you travel if required by this position? Yes ___ % of Time _____ No ___

Are you able to carry out the tasks of the position applied for with or without reasonable accommodation?

Yes ___ No ___

Education

High School

School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____ Grade Point Average: _____



College

School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____ Grade Point Average: _____

College or Graduate School or Other Technical Training

School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____ Grade Point Average: _____

List any certificates earned or in progress, and/or any additional training programs not included in your formal education.

List any Professional Affiliations to which you belong (please do not list activities which would indicate age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief, or disability):

Previous Employment

List your current or most recent employment first. Go back ten years if you have been employed that long. Use an additional sheet of paper if necessary. Include work related internships, military and volunteer work.

Current (Or Most Recent) Employer: _____

City and State: _____ Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Dates of Employment: From: _____ To: _____

May we contact this employer? Yes ___ No ___



Previous Employer:

City and State: _____ Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Dates of Employment: From: _____ To: _____

May we contact this employer? Yes ___ No ___

Previous Employer: _____

City and State: _____ Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Dates of Employment: From: _____ To: _____

May we contact this employer? Yes ___ No ___

If the above employment history does not cover all time periods, please include a brief description below of the time period not employed and any related activity:

1) Date: From: _____ To: _____
Activity: _____

2) Date: From: _____ To: _____
Activity: _____

3) Date: From: _____ To: _____
Activity: _____



Personal/Professional References (excluding relatives)

Name	Job Title	Company	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Acknowledgement

All hiring and employment at DeFelsko Corporation is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by DeFelsko Corporation has no specific term and may be terminated by the employee or DeFelsko Corporation with or without notice and with or without cause. I acknowledge that DeFelsko Corporation has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with DeFelsko Corporation, and that failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to DeFelsko Corporation. I agree to release and hold harmless DeFelsko Corporation from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with DeFelsko Corporation may be terminated.

Signature

Date