



# PEERLESS MACHINE & TOOL CORPORATION

## Employment Application

PEERLESS MACHINE & TOOL CORPORATION IS AN EQUAL OPPORTUNITY EMPLOYER. APPLICANTS WILL RECEIVE CONSIDERATION FOR POSITIONS, WITHOUT REGARD TO RACE, COLOR, RELIGION, AGE, SEX, SEXUAL ORIENTATION, MARITAL STATUS, INDIVIDUALS WITH DISABILITIES, AND DISABLED VETERANS AND VETERANS OF THE VIETNAM ERA OR OTHER SEGMENTING CHARACTERISTICS PROTECTED BY LAW.

<b>Candidate's Name:</b>		<b>Date:</b>	
<b>Address:</b>			
<b>Telephone Number:</b>		<b>Email address:</b>	

Are you authorized to work in the U.S.? .....  Yes  No

Are you over 18 years of age? [If not, employment is subject to verification of minimum legal age.] ....  Yes  No

Have you ever worked or attended school under another name? If so, under what name?

### General Information

<b>Position Desired:</b>		
<b>How did you learn about this opening?</b> Indicate if an employee referred you to this position		
<b>Have you ever applied for employment with Peerless Machine &amp; Tool Corporation?</b> If so, indicate date of last application.		

### Education

<b>High School:</b>	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
<b>Technical School:</b>	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
<b>College/University:</b>	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
<b>Post-Graduate Education:</b>	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
<b>Other education, certification, training or special skills:</b>		



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## Work Experience

*Please list all previous employment for the last ten years, beginning with the most recent. If you need more room, you may attach another sheet of paper or your resume.*

Employer:		City, State:	
Dates of employment:	Position Held:		Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor Telephone & Email:			Hourly Rate of Pay:
Description of Duties:			

Employer:		City, State:	
Dates of employment:	Position Held:		Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor Telephone & Email:			Hourly Rate of Pay:
Description of Duties:			

Employer:		City, State:	
Dates of employment:	Position Held:		Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor Telephone & Email:			Hourly Rate of Pay:
Description of Duties:			



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## References

<i>Please provide the names of three persons not related to you, whom you have known at least one year.</i>	
Name:	Relationship:
Telephone & Email:	Number of years acquainted:

Name:	Relationship:
Telephone & Email:	Number of years acquainted:

Name:	Relationship:
Telephone & Email:	Number of years acquainted:

## Authorization and Acknowledgements

I affirm that the information I have provided in this application is true to the best of my knowledge, information, and belief, and I have not knowingly withheld any information requested. I understand that withholding or misstating any information requested in this application is a ground for rejection of my application, and if hired is grounds for discharge. This is true of information provided during the interview process as well. This application is valid for 30 days, after that time I must reapply for consideration.

I authorize Peerless Machine & Tool Corporation to verify my references, record of employment, education record, and any other information I have provided. Unless otherwise noted, I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers and all other persons and entities, from any and all claims, demands or liabilities arising out of or in any way related to such inquiry or disclosure.

If I am hired, I understand that either Peerless Machine & Tool Corporation or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Peerless Machine & Tool Corporation has the authority to make any assurance to the contrary.

Once employed I will be provided with the company policies and understand it is my obligation to obey and stay up to date on policies. These policies may include drug testing and the ability to view my electronic communications as related to the company.

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Candidate's Signature

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Date