

Application for Employment



WWW.MIDSTATEEQUIPMENT.COM

Mid State Equipment, Inc.
 Human Resource Department
 W1115 Bristol Road
 Columbus, WI 53925
 (920) 623-4020 or (608) 251-5400

Qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, color, national origin, religion, age, sex, disability, veteran status, or any other characteristic protected under local, state or federal law. WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

(PLEASE PRINT)

Position(s) Applied For:	Date of Application:
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Last Name: _____ First Name _____ Middle Initial _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Cell Phone: _____

Best time to contact you at home is:	
If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever filled out an application with us before? If Yes, give date:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed with us before? If Yes, give date:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do any of your friends or relatives work here?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>(Proof of citizenship or immigration status will be required upon employment.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a felony or are there any pending charges against you? <i>(A conviction does not automatically bar you from employment)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date available for work:	What is your desired salary range?
Are you available to work:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Are you currently on "lay-off" status and subject to recall?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you travel if a job requires it?	<input type="checkbox"/> Yes <input type="checkbox"/> No



Employment History

Please list your complete employment history. List present or most recent employer first. Use an additional page, if necessary.

Employer	Employed (mo./Yr.)	Type of work performed	Present or last salary	Reason for leaving
	From:			
	To:			

Address/City

Name of Supervisor

Employer	Employed (mo./Yr.)	Type of work performed	Present or last salary	Reason for leaving
	From:			
	To:			

Address/City

Name of Supervisor

Employer	Employed (mo./Yr.)	Type of work performed	Present or last salary	Reason for leaving
	From:			
	To:			

Address/City

Name of Supervisor

Education

Schools	Name/Location	Circle Last Yr. Completed	Major Courses	Diploma/Degree
High School		9 10 11 12		
College		1 2 3 4 more		
Business or Trade		Months Attended		

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

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

Additional Information

Other Qualifications

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

Specialized Skills

Do you have any other skills you wish to mention? _____

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

References

Name _____

Address _____ City _____ State _____ Zip Code _____

Relationship: _____ Telephone Number (____) _____

Name _____

Address _____ City _____ State _____ Zip Code _____

Relationship: _____ Telephone Number (____) _____

Name _____

Address _____ City _____ State _____ Zip Code _____

Relationship: _____ Telephone Number (____) _____

**For additional references, please attach a separate sheet.*

I certify that the answers given herein are true and complete.

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 an authorized executive of this organization specifically acknowledges such change in writing.

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 _____ Date _____



Vicki L. Kalscheuer
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