

COGAR MANUFACTURING, INC.

APPLICATION FOR EMPLOYMENT

Applications are considered for all positions without regard to race, color, religion, sex, nation of origin, age, marital, familial or veteran status, ancestry or disability.

Date: _____ Phone: _____

Name: _____ Social Security #: _____

Address: _____

City/State/Zip: _____

Are you 18 years or older? _____ Can you provide proof that you are eligible to work in the U.S.? _____

Are you now employed? _____ When can you start? _____

Present Employer: _____

Have you applied to this company before? _____ When? _____

List any relatives or friends working for this company:

1. _____ Relationship _____

2. _____ Relationship _____

3. _____ Relationship _____

Circle the highest grade completed in each school category.

High School: 9 10 11 12 Did you graduate? _____

College: 1 2 3 4 Did you graduate? _____

High School Name: _____

College Name: _____

Military: Branch of Service _____

Date Entered: _____ Date Discharged: _____

Final Rank: _____ Type of Discharge: _____

List all employers **STARTING WITH THE MOST RECENT.** Account for all periods, including unemployment and military service.

1. Employer: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Starting Date: _____ Ending Date: _____

Starting Wage: _____ Ending Wage: _____

Work Performed: _____

2. Employer: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Starting Date: _____ Ending Date: _____

Starting Wage: _____ Ending Wage: _____

Work Performed: _____

3. Employer: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Starting Date: _____ Ending Date: _____

Starting Wage: _____ Ending Wage: _____

Work Performed: _____

4. Employer: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Starting Date: _____ Ending Date: _____

Starting Wage: _____ Ending Wage: _____

Work Performed: _____

References: Give names of three persons not related to you, whom you have known for at least one year.

	<u>NAME</u>	<u>PHONE</u>	<u>ADDRESS</u>	<u>YEARS KNOWN</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Have you ever pleaded guilty to, or otherwise been convicted of, a felony or misdemeanor, excluding traffic offences? _____ Yes _____ NO

If "YES" explain: _____

Pre-employment statement: Please read carefully!!

I certify that the answers given in this application are true and complete to the best of my knowledge and belief.

I hereby give Cogar Manufacturing, Inc. (“Cogar”) the right to make a thorough investigation of my past employment, education, and other activities and to use information thereby obtained in whatever manner is desired; and I release from all liability all persons, companies, and corporations supplying information. I UNDERSTAND AND AGREE THAT ANY FALSE ANSWER OR STATEMENT OR IMPLICATION MADE BY ME IN THIS APPLICATION OR IN OTHER DOCUMENTS SHALL BE CONSIDERED SUFFICIENT FOR DENIAL OF EMPLOYMENT OR IMMEDIATE DISMISSAL WITHOUT RECOURSE IF I HAVE BEEN EMPLOYED.

I further understand that, should I be offered employment with Cogar, as a prerequisite to regular employment with Cogar, I must undergo a complete physical examination, including drug testing, by a physician chosen by Cogar at its expense. This exam may be scheduled by Cogar at any time during my 90 working-day trial period.

Finally, I understand that nothing contained in this employment application or in my undergoing a physical examination is intended to create a contract between Cogar Manufacturing and I for either employment or the providing of any benefit. No oral promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon Cogar Manufacturing unless specifically made in writing.

Signature _____ **Date** _____

AUTHORIZATION AND RELEASE

I, _____, have applied for a job with Cogar Manufacturing, Inc. . In connection with such application, I have authorized Cogar to make inquiry concerning my employment with all of my prior employers. I have further agreed to and hereby do release claims and liabilities of any nature whatsoever with respect to the information which may be provided to Cogar by my former employers.

Date: _____ Applicant: _____