

1100 Evans Avenue - Valparaiso, IN 46383 Tel: 219.462.1801 Fax: 219.462.7941 www.thogren.com - info@thogren.com

APPLICATION FOR EMPLOYMENT

EQUAL EMPLOYMENT OPPORTUNITY/NON-DISCRIMINATION POLICY

It is the policy of Thorgren Tool & Molding Inc., not to discriminate on the basis of race, color, religion, gender, national origin, age, disability, veteran status or any other protected class, in its hiring decisions and employment policies, as required by the Indiana Civil Rights Act (I.C. 22-9, 1), Title VI and VII (Civil Rights Act of 1964), the Equal Pay Act of 1973, and any other applicable law. http://www.dol.gov/ofccp/regs/compliance/posters/ofccpost.htm.

Thorgren Tool & Molding offers reasonable accommodation in the employment process for individuals with disabilities. If you need assistance in the application or hiring process to accommodate a disability, you may request an accommodation with Human Resources at any time.

POSITION APPLIED FOR:									
PERSONAL (Please print)									
Last Name	First Name		M	iddle Initial					
Street address	P.	O. Box	Count	у					
City	State		Zip co	ode					
E-mail address		Contact Phone ()						
HIGH SCHOOL	EDUCAT	ION							
High School Graduate? \square Yes \square No If Selected No, General Education (GED) Test Passed? \square Yes \square No									
HIGH SCHOOL ATTENDED (if applicable)	LOCATION CITY/STATE	_							
COLLEGE									
COLLEGE OR TECHNICAL SCHOOL ATTENDED	LOCATION CITY/STATE	MAJOR /FIELD	GRADUATED	DEGREE	GPA				
			☐ YES						
			□ NO						
			☐ YES						
			□ NO						
If degree is incomplete, list number of credit hours completed: Currently Enrolled:									
Expected date of graduation:									
Additional commercial or technical courses take	en:								

WORK EXPERIENCE

Please list **ALL** your work experience, starting with your present or more recent employment. Use **additional sheets if necessary**. Include information on military service. Complete in full even if your resume is enclosed.

Present/ Most Recent Employer:			
		Phone:	
Job Title:	Start Date:	End Date:	Still employed? 🗖 Yes 🗖 No
		or leaving or seeking other employment:	
Beginning Salary:	Ending Salary:	Supervisor's Name:	
Previous Employer:			
City:	State:	Phone:	
Job Title:	Start Date:	End Date:	
Average hours per week worked:	Specific reason for	or leaving or seeking other employment:	
Please include a short summary of	f your main job duties:		
Beginning Salary:	_ Ending Salary:	Supervisor's Name:	
Next Previous Employer:			
		Phone:	
Job Title:	Start Date:	End Date:	
Average hours per week worked:	Specific reason for	or leaving or seeking other employment:	
Please include a short summary of	f your main job duties:		
Beginning Salary:	_ Ending Salary: ————	——— Supervisor's Name: ————————————————————————————————————	
Next Previous Employer:			
City:	State:	Phone:	
Job Title:	Start Date:	End Date:	
Average hours per week worked:	Specific reason for	or leaving or seeking other employment:	
Please include a short summary of	f your main job duties:		
Beginning Salary:	Ending Salary:	Supervisor's Name:	

REFERENCES

Please indicate the names of two work or professional references that are familiar with your skills or abilities. Address/Company Name Phone (1) Please indicate any experience, special aptitudes, or skills that you feel you have that pertain to the position for which you are applying: Summarize any additional information necessary to describe your full qualifications, professional objectives, or goals: **QUESTIONS** YES NO 1. Are you presently being investigated, or under a procedure to consider your discharge for misconduct by your present employer? YES NO 2. Have you ever been disciplined, discharged or asked to resign from a prior position? YES NO 3. Have you ever resigned from a prior position without being asked, under circumstances involving your employer's investigation for sexual misconduct with another person, mishandling of funds, or criminal conduct? Any "yes" answers must be explained on the back of this application including date of incident and charge or offense in question. APPLICANT STATEMENT I certify that the information I have provided in this application is true, correct, and complete to the best of my knowledge. I authorize Thorgren Tool & Molding, Inc., or its agent, to research and verify the information I have provided on my application for employment, including my personal background, character, work history and qualification. I understand that any false or misleading information on this application shall be fully sufficient grounds to be refused employment or if hired. grounds for immediate discharge whenever the information is discovered. Signature of Applicant:

EXPLANATIONS TO QUESTIONS FROM PAGE 3:							
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