

Omega Thermo Products, LLC

PO Box 141, Stratford, WI 54484

Employment Application

We are an equal opportunity employer. We consider all applications for positions without regard to race, color, gender, national origin, age, disability, marital status or any other legally protected status.

Position Applied For:	<input type="text"/>	Date of Application	<input type="text"/>		
Last Name	<input type="text"/>	First Name	<input type="text"/>		
Address	<input type="text"/>	City	<input type="text"/>	State	<input type="text"/>
Zip	<input type="text"/>	Telephone Number	<input type="text"/>		
Social Security Number (voluntary)	<input type="text"/>				

Best Time to Contact you by Telephone:

Have you ever applied with us before? Yes No

Have you ever been employed by us before? If Yes Date Yes No

Do you have any friends or relatives working here? Yes No

If yes state name and relationship

May we contact your current employer? Yes No

Are you prevented from lawfully becoming employed in this country (USA) do to Visa or Immigration status? Yes No

Proof of citizenship or immigration status will be required upon employment.

Have you ever been convicted of a felony? Yes No

Are you currently employed? Yes No

Are you currently on "Lay-off" status and subject to recall? Yes No

Date Available for Work? ____/____/____

Are you available to work: Full Time Please indicate Shift available 1st or 2nd

Part Time Please indicate time (Morning Afternoon Evening)

Temporary Please indicate dates (____/____/____ -- ____/____/____)

What is your desired salary Range?

Comments: _____

Education

School	Name & Address of School	Course of Study	Years Completed	Diploma Degree	Date of Grad.
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High School					
College					
Graduate Studies					
Other (Specify)					

Describe any specialized training including computer skills: _____

Work Experience

Start with your current or last job. Include any job related military service.

Employer	Dates Employed		Job Description
Address	From	To	
Telephone number			
Starting / Present Job Title	Hourly Rate/ Salary		
Supervisor	Starting	Ending	
May We Contact Yes / No			

Reason for Leaving

Employer	Dates Employed		Job Description
Address	From	To	
Telephone number			
Starting / Present Job Title	Hourly Rate/ Salary		
Supervisor	Starting	Ending	
May We Contact Yes / No			

Reason for Leaving

Employer	Dates Employed		Job Description
Address	From	To	
Telephone number			
Starting / Present Job Title	Hourly Rate/ Salary		

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Supervisor	Starting	Ending	
May We Contact Yes / No			

Reason for Leaving

Comments: Include explanation of any gaps in employment. _____

Personal References

Name	Phone Number	Best Time to Call	Occupation

I certify that the facts contained in this application are true and complete to the best of my knowledge and if falsified may be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you information concerning my previous employment.

Signature of Applicant

Date