



APPLICATION FOR EMPLOYMENT

BOTH PAGES OF APPLICATION MUST BE COMPLETED AND SIGNED

FluiDyne Fluid Power is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

(PLEASE PRINT)

Date of Application ____/____/____	Position Sought: _____	How did you learn about FluiDyne FP? _____	
Last Name _____	First Name _____	Middle Initial _____	
Street Address _____	City _____	State _____	Zip Code _____
Social Security Number (voluntary) ____-____-____	Telephone Number(s) () _____ - _____ () _____ - _____		

Are over the age of 18? Yes No

Are you legally eligible for employment in the United States?..... Yes No

If offered employment, you will be required to provide documentation to verify eligibility

Have you ever held a position with us before? Yes No

If yes, please give date: ____/____/____ Job title held: _____

Do any of your friends or relatives work here? Yes No

If yes, provide name, relationship to you and job title: _____

Are you presently employed? Yes No

Have you ever been convicted of a felony or a misdemeanor? (A conviction will not necessarily result in the denial of employment.)..... Yes No

If yes, please explain: _____

Date available to start: ____/____/____

Desired wage: \$ ____ . ____ per ____ - \$ ____ . ____ per ____

Are you available to work: ____ Full Time: ____ 1ST shift ____ 2nd shift ____ 3rd shift ____ any shift

____ Part Time: ____ 1ST shift ____ 2nd shift ____ 3rd shift ____ any shift

____ Temporary Dates: ____/____/____ through ____/____/____

PLEASE REFER TO THE FluiDyne JOB DESCRIPTION FOR THE POSITION YOU ARE APPLYING FOR BEFORE ANSWERING THIS QUESTION:
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. YES NO

EDUCATION

School Level	Name and Location of School	Course of Study	# Years Completed (circle one)	Diploma / Degree
High School			1 2 3 4	
Undergraduate College			1 2 3 4	
Graduate College			1 2 3 4	
Other Education(Specify)			1 2 3 4	



EMPLOYMENT EXPERIENCE

Start with your current or last job. Exclude any indication of race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates employed From: _____ To: _____ _____/_____/_____ ____/____/_____	Work Performed Description:
Address		
Telephone Number	_____/_____/_____ ____/____/_____	
Supervisor	Hourly Rate / Salary	
Job Title Starting -Present	Starting: \$_____._____ Final: \$_____._____	
Reason for Leaving	May we contact? ____ Yes ____ No	

Employer	Dates employed From: _____ To: _____ _____/_____/_____ ____/____/_____	Work Performed Description:
Address		
Telephone Number	_____/_____/_____ ____/____/_____	
Supervisor	Hourly Rate / Salary:	
Job Title Starting -Present	Starting: \$_____._____ Final: \$_____._____	
Reason for Leaving	May we contact? ____ Yes ____ No	

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Address		
Telephone Number	_____/_____/_____ ____/____/_____	
Supervisor	Hourly Rate / Salary:	
Job Title Starting -Present	Starting: \$_____._____ Final: \$_____._____	
Reason for Leaving	May we contact? ____ Yes ____ No	

List any special skills you have related to the position you are applying for:

REFEERENCES:

Name	Occupation (Job Title)	Relationship to You	Phone Number
1.			
2.			
3.			

Describe any additional information that may be helpful to FluiDyne in considering your application, including any job related training in the U.S. Military:

APPLICANT'S STATEMENT

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.

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 such change is specifically acknowledged in writing by an authorized executive of this organization.

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 regulation of the Employer.

SIGNATURE OF APPLICANT

_____/_____/_____
DATE

This application will only be considered active for 30 days from the date received. After 30 days, you may inquire if applications are being accepted and reapply.