

EMPLOYMENT APPLICATION

55 Nadeau Drive
Rochester, NH 03867
Phone (603) 332-0555
Fax (603)332-5357

PERSONAL INFORMATION



Date _____

Name _____ Phone _____

Mailing Address _____
(Street) (City) (State) (Zip)

Email Address _____

_____(initial) acknowledging that you will be emailed a link from Perdictive Index, to complete a pre-employment behavioral assesment. This is used to establish training and team development if employed.

_____(initial) acknowledging that email is used as a one of our primary forms of communciation.

Are you eligible to be lawfully employed in this country? Yes ____ No ____

(Proof of citizenship or immigration status will be required upon employment)

What position are you applying for? _____

What shift are you available to work _____ Full-time or part time _____

Have you ever worked for Spaulding Composites Inc., if so, when? _____ Dept. _____

Who referred you to Spaulding Composites Inc.? _____

Do you have reliable transportation? _____

EDUCATION	NAME AND LOCATION OF SCHOOL	COURSES TAKEN
High School		
College		
Trade, Business, or Correspondence School		

EMPLOYMENT HISTORY

List four most recent employers

DATE (MONTH & YEAR)	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION & SUPERVISOR	REASON FOR LEAVING
From: To:				
From: To:				
From: To:				
From: To:				

Have you ever been convicted of a felony? If yes, explain _____

Do you know of any reason that may cause your employment here to be of short duration? _____

If the answer is yes, explain _____ Date expected to leave _____

U.S. MILITARY OR NAVAL SERVICE:

Branch _____ Rank _____ Date Entered _____

Date Discharged _____ Where Discharged _____

Duties/Special Training _____

Present Membership in National Guard or Reserves _____

Active _____ Inactive _____ Expiration Date of Membership _____

NOTICE TO APPLICANTS:

All prospective associates are required to take a pre-employment medical examination, including drug and alcohol urinalysis, prior to final acceptance for employment. All offers of employment are contingent upon a negative drug test. Additionally, associates may also be requested to undergo drug and alcohol testing for cause, where permissible by law, at other times during employment with the company.

I have read and agree to these statements _____ (initials)

STATEMENT OF APPLICANT:

"I authorize verification of previous employment data and release Spaulding and my Former Employers from any liability in connection therewith. I understand that any misrepresentation or omission of facts called for may be cause for dismissal at any time during employment. I understand that the information given in this application for employment and any statements made by former employers and references will become part of my permanent personnel record and may be disclosed by Spaulding without limitation or liability in response to requests for information from other sources of employment. I understand and agree that, if hired, I will conform to the company's rules and regulations, and that my employment is at will and assured for no definite period of time and may be terminated by either party with or without cause and with or without prior notice.

I understand that no company representative, other than the president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing."

SIGNATURE

DATE

INTERVIEW NOTES:

Call for Interview _____ Yes _____ No _____ Date: _____ Time: _____

Interviewed by: _____

Comments: _____

Acceptable for Employment? _____ Starting Rate _____ Starting Date _____ Shift _____

Position _____ Department _____ Clock/Emp No. _____