



APPLICATION FOR EMPLOYMENT

An equal opportunity employer

PERSONAL INFORMATION

NAME

Last	First	Middle
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ADDRESS

Street	City	State	Zip
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PHONE NUMBER

REFERRED BY

EMPLOYMENT DESIRED - State the specific job position for which you are applying.

Position	Date you can start	Desired Salary
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How did you hear about this opportunity?

Are you currently employed?	May we contact your current employer?
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Date: Month and Year	Name and Address of Employer	salary	Position	Reason For Leaving
From				
To				
From				
To				
From				
To				
From				
To				

It is the policy of Anderton Machining, LLC to comply with all applicable state and federal laws prohibiting discrimination in employment, based on race, age, color, sex, religion, national origin, disability, or other protected classification.

I understand that employment with Anderton Machining, LLC is at-will, meaning that I or Anderton Machining, LLC may terminate my employment at any time, or for any reason consistent with state or federal law.

I authorize Anderton Machining, LLC to conduct a thorough background investigation of my work and personal history, and verify all data given on this application and during interviews. I hereby release Anderton Machining, LLC and its representatives or agents, from any liability that might result from such investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information..

I understand Anderton Machining, LLC requires the successful completion of a drug and/or alcohol test as a condition of employment.

I certify all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

DATE:

SIGNATURE:
