Dutchman Manufacturing Company, LLC. Application for Employment



Dutchman Manufacturing Company, LLC is an equal employment opportunity employer dedicated to a policy of non-discrimination in em-ployment based upon an individual's race, color, creed, religion, age, sex, national origin, ancestry, marital status, sexual orientation, disability, arrest/conviction record, or any other status protected under the law. In reading and answering the following questions, please keep in mind that none of the questions are intended to imply any limitations, illegal preferences, or discrimination based upon any non-job-related information. This application will be given consideration, but its receipt does not imply that the applicant will be inter-viewed or employed.

Position applie	ő i						
	ilable to Work:						
Mon:	Tue:	Wed:	Thu:	Fri:	Sat:	Sun:	
PERSONAL DA	.TA						
Nama.							
Name:							
Address:	Street Address		City	,	State	Zip	
Daytime Phone	e:	Ev	ening Phone:		E-mail:	'	
()		()				
GENERAL INF	ORMATION						
				•	give the date of application	on YES	N
	· ·		ompany in the pas employed if differe	•	give dates of employmer name.	nt,	N
-	ave any commitn ompany? If yes, p		er employer that m	night affect your	availability for employme	ent YES	N
	an you furnish pro se explain:	oof that you are	18 years of age, o	or if under 18, do	you have a permit to work	k? YES	N
				n the United State			_

prisonin	the past 7 years a nature of the of	d of a misdemeanor or felony, exc ? Note: A yes answer does not a fense, date, and type of job for w	automatically disquali	fy you from employme	ent 🔲 📙
7. How dic	you hear about	the position you are applying for	? (Example: Newspap	er, Internet, etc.)	
	OO NOT ANSW	ER QUESTIONS 8 OR 9 IF A JO	B DESCRIPTION IS I	NOT ATTACHED!	
8. Are you tion?	able to perform	the tasks listed on the attached j	ob description with o	without an accommod	da- YES NO
9. If necess of the jo	-	modation could we make that wo	uld allow you to perfo	rm the essential functio	ons
SCH00LS A	TTENDED	NAME OF SCHOOL AND LOCATION	DID YOU GRADUATE?	DEGREE / DIPLOMA / CERTIFICATE	MAJOR COURSE OF STUDY
HIGH SC	HOOLS	CHECK HIGHEST GRADE COMPLETED 9 10 11 12			
TECHNICAL VOCAT OR MILITAR					
COLLEGE OR I	INIVERSITY				
GRADUATE	SCH00L				
PROFESSION <i>A</i>	L SEMINARS				
JOB-RELATEI		enses, equipment qualified to open abilities:			perated, and other

EMPLOYMENT HISTORY

List Present or Most Recent Employer First - Please complete even if a resume is attached. Attach additional sheet if necessary.

Company Name	Dates of Employment
Address	Supervisor (and phone number, if known)
City, State, Zip	Your name when employed, if different from present
Job Title and Duties	Reason for leaving
Final Salary: \$ per	May we contact? Yes No
Company Name	Dates of Employment
Address	Supervisor (and phone number, if known)
City, State, Zip	Your name when employed, if different from present
Job Title and Duties	Reason for leaving
Final Salary: \$ per	May we contact? Yes No
Company Name	Dates of Employment
Address	Supervisor (and phone number, if known)
City, State, Zip	Your name when employed, if different from present
Job Title and Duties	Reason for leaving
Final Salary: \$ per	May we contact? Yes No

Please account for any time you were not employed after leaving school in the past 7 years (You need not list any unemployment periods of one month or less).

Time Period(s)

Reason(s) for unemployment

If you were unable to list all past jobs or periods of unemployment on this form, please use an additional sheet.

REFERENCES -	· LIST THREE BUSINESS R	ELATED INDIVIDUALS THAT AR	E NOT FORMER EMPLOYERS	
Name	<u>Address</u>	<u>City, State, Zip</u>	Phone Number	<u>Occupation</u>
and describe any applied, and have	paid or unpaid activities, he not been listed previous	ne people gain job-related expendence, or training the sly in this application. (You may ogin, age, disability or other persogin,	at might aid you in performing t mit any activities, honors, meml	he job(s) for which you have berships or other items that

Please add any additional information (except that which identifies your race, sex, age, religion, national origin, disability or other non-job-related personal information) that you think may be relevant to a decision to hire you.

	IMPORTANT
Initials	PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING
	By my signature and initials, I promise that the information provided in this employment application (and accompanying resume, if any) is true and complete, and I understand that any false information or significant omissions may disqualify me from further consideration for employment, and may be justification for my dismissal from employment by Dutchman Manufacturing Company if discovered at a later date. I agree to immediately notify Dutchman Manufacturing Company if I should be charged with a criminal offense while my job application is pending.
	I authorize any person, school, current employer (except as previously noted), past employer(s), government or investigative agencies, and other organizations that may be named in this application form (and accompanying resume, if any) to provide the company with relevant information and opinion that may be useful to Dutchman Manufacturing Company in making a hiring decision, and I release such persons and organizations from any legal liability in making such statements.
	If offered a job, I give permission for a drug test and I consent to the release to the company of any medical information, as may be deemed necessary by the company in judging my capability to perform the essential functions of the job for which I am applying (with or without a reasonable accommodation).
	I understand that, if hired, I may not engage in consulting, sales, investments or other activities that may create a conflict of interest with Dutchman Manufacturing Company.
	I understand that this application does not, by itself, create a contract of employment. I understand and agree that, if hired, my employment is at-will, and may, regardless of the date of payment of my wages or salary, be terminated at any time.
Signed:	Date:

Authorization and Understanding

I represent that the answers and information given by me in this application are true and complete. I authorize Dutchman Manufacturing Company to verify the information I have provided and to make any investigation of my background deemed necessary. I also authorize third parties (such as former employers, law enforcement organizations, financial institutions, educational institutions) contacted by Dutchman Manufacturing Company to furnish any information relevant to my application for employment, excluding health or medical history or other illegal information, and waive any applicable notice requirement. I release all persons and organizations from any and all liability ad any and all damages whatsoever for furnishing such information. I acknowledge that any false, inaccurate or misleading information my result in a refusal to hire or dismissal.

If employeed, I agree to sign any requested noncompete, nondisclosure and nonsolicitation agreement. I further agree not to disclose the trade secrets or confidential information of third parties to the Dutchman Manufacturing Company at any time. I have disclosed to the Dutchman Manufacturing Company any similar agreements that I have signed with my present and/ or past employers. I consent to all legally permissible medical examinations and drug and alcohol testing required by the Dutchman Manufacturing Company.

I understand and agree that employment with the Dutchman Manufacturing Company is at-will and that either I or the Dutchman Manufacturing Company can terminate my employment and compensation, for any reason, and with or without notice, at any time. I acknowledge that no representations, either oral or written, have been made to me to the contrary and that any pre-existing understandings which contradict an at-will status of employment are canceled. Further, I understand that only Dutchman Manufacturing Company has any authority to enter into any agreement of employment for any fixed period of time, or to make any agreement contrary to the foregoing and that any such agreement must be in writing and signed by the president.

In consideration of my employment, I agree to conform to the rules and policies of Dutchman Manufacturing Company. Also, I agree not to begin any action or suit relating to employment with Dutchman Manufacturing Company more than six (6) months after the date of the termination of such employment and I waive any statue of limitations to the contrary. If this provision is held invalid or unforceable, I agree that such time period will be deemed increased to the minimum extent necessary to make such provision valid and enforceable.

This application for employment shall be considered active for a period of time not to exceed sixty (60) days. Any applicant wishing to be considered for employment beyond this time period inquire as to whether or not applications are being accepted at that time.

I knowingly and voluntarily waive all right to trial by jury or any or all claims or disputes between me and Dutchman Manufacturing Company.

If any term of this document is found to be legally unenforceable as written, it can be modified to permit enforcement as far as legally possible.

My signature below indicates that I have read and understood the above paragraphs.

Signed:	Date: