ROBERTS
CNC • Swiss • Screw Machining

EMPLOYMENT APPLICATION

Name: _____ Date: _____

Social Security Number: _____ Phone Number: _____

Address: _____ City/State/Zip: _____

E-mail: _____

Section One (Personal/Position Related Preferences):

Please list any other name under which you have been employed: _____

Are you authorized to work in the United States? ☐ Yes ☐ No

Work Preference? ☐ Full Time ☐ Part Time ☐ Temporary Are you available to work overtime? ☐ Yes ☐ No

For which schedules are you available? ☐ Weekdays ☐ Weekends ☐ Evenings ☐ Nights ☐ Overtime

What position are you applying for? _____ What date are you able to start:_____

What is your salary or wage expectations please specify an amount: _____

Were you referred by or know someone at Roberts Automatic Products, Inc? _____

Have you ever been employed by Roberts Automatic Products, Inc? ☐ Yes ☐ No If so, when?_____

List any languages in which you are fluent: _____

Are you at least 18 years of age and legally eligible for work in the United States? Yes No

Have you received a description of the job or been made aware of the essential functions of the job? Yes No

Do you understand the job requirements? Yes No (If no, please explain) _____

_____

Are you on layoff and subject to recall? Yes No

Are you currently bound by a non-competition or trade secret agreement? Yes No

(If yes, please explain)_____

Have you ever been discharged or asked to resign from a job? Yes No

(If yes, please explain)_____

JOB RELATED SKILLS

***Please answer the following questions if the position you are applying for requires driving a motor vehicle:**

Are you applying for a position which would require you to drive a vehicle? ☐ Yes ☐ No

(If so, please refer to Driving Agreements and complete.)

Do you have a valid driver's license? Yes No

If yes, Driver's License Number:_____ State of Issue:_____

Please list all states from which you hold or have held a driver's license in the past 5 years:_____

Please use this space to list any special skills you may have had that relate to the position:

Please list any professional licenses, designations, certifications, etc., that may relate to the position. Include date granted, name of organization and any other relevant information.

1. _____

2. _____

3. _____

Section Two (Education):

Education/Type	Name & City	Coursework Taken	Did you Graduate?	Degree Received
High School			Yes / No	
College			Yes / No	
Graduate School			Yes / No	
Other			Yes / No	

Military Service	Branch:	Length of Service:	Dates:

Section Three (Additional Information):

List any special achievements or qualifications we should be aware of or any other information you would like us to know about you:

Section Four (Work History):

Please give your work history. Note any gaps in employment. Begin with the most recent employer. Feel free to use additional paper if necessary. Do not write "See Resume".

#1 - Company Name: _____ Phone Number: _____

Address: _____ City/State/Zip: _____

Position Held: _____ Dates of Employment: _____ - _____

Reason for Separation: _____

Supervisor's Name: _____ May we Contact: ☐Yes ☐No

Duties/Responsibilities:

_____

_____

#2 - Company Name: _____ Phone Number: _____

Address: _____ City/State/Zip: _____

Position Held: _____ Dates of Employment: _____ - _____

Reason for Separation: _____

Supervisor's Name: _____ May we Contact: ☐Yes ☐No

Duties/Responsibilities:

_____

_____

#3 - Company Name: _____ Phone Number: _____

Address: _____ City/State/Zip: _____

Position Held: _____ Dates of Employment: _____ - _____

Reason for Separation: _____

Supervisor's Name: _____ May we Contact: ☐Yes ☐No

Duties/Responsibilities:

_____

_____

Application Verification / Acknowledgement

In completing this application I verify that everything is true and accurate. Should I be granted a personal interview, I agree that information will be true as well. I understand that any false statements can lead to immediate termination. I understand that this application will only be considered for 30 days from the date I signed the document. Should I want to be considered after this time, I will need to re-apply.

ROBERTS AUTOMATIC PRODUCTS has the right to verify any of this information with any former employer, motor vehicle department, criminal history, personal reference or educational institution. ROBERTS AUTOMATIC PRODUCTS has the right to use outside agencies as it deems necessary to verify this information and/or during the course of an investigation at any time prior to or during my employment.

Should I be offered a job, I agree to comply with all policies, including drug testing and other safety policies, of ROBERTS AUTOMATIC PRODUCTS. I understand only management has the authority to make or change policies. I understand that ROBERTS AUTOMATIC PRODUCTS requires receipt of favorable results of any post offer physical examination, audiogram, and drug screen. I understand that ROBERTS AUTOMATIC PRODUCTS also requires favorable results from a review of my background information inclusive of criminal records and the completion of an employment agreement if applicable for the position.

I understand that ROBERTS AUTOMATIC PRODUCTS is not obligated to provide employment and that I am not required to accept employment. Nothing in this application or in any prior or subsequent oral or written communication is intended to create any contract or employment. I agree to not record any interaction or materials within or regarding the company, its employee and/or other interaction to which I may or may not be a party prior to, during or following my employment. Should there ever be litigation between myself, my parties and ROBERTS AUTOMATIC PRODUCTS, I agree to utilize arbitration as a viable and binding alternative resolution.

I am aware that ROBERTS AUTOMATIC PRODUCTS is an equal opportunity employer. They do not hire, promote, terminate or make any other employment decisions based on race, creed, color, sex, national origin or other segmenting factor. ROBERTS AUTOMATIC PRODUCTS is an at will employer and as such has the right to terminate employment at any time. Should I become employed, I have the same right to terminate my employment at any time.

_____ _____

Applicant Signature Date