



MONROE EQUIPMENT, INC.

Application for Employment

AN EQUAL OPPORTUNITY EMPLOYER

Please Print or Type

PERSONAL DATA	Last			First			Middle			Date						
	Name															
	Number			Street			City			State		Zip				
	Address															
	Email Address									Best method to contact you:						
										Email <input type="checkbox"/> Telephone <input type="checkbox"/>						
JOB INTEREST	Do you have the legal right to live and work in the U.S.?					If no, what is your Visa status?			Age (If under 18)		Social Security Number					
	Yes <input type="checkbox"/> No <input type="checkbox"/>															
	Notify in case of Emergency						Telephone			Relationship						
JOB INTEREST	Position Desired						Salary Expected			Annual \$						
							Week \$			Month \$						
	Other positions for which you are qualified						Date Available									
JOB INTEREST	Have you ever worked for Monroe Equipment, Inc. before? Yes <input type="checkbox"/> No <input type="checkbox"/>															
	If yes, dates employed?															
EDUCATION	Type of School		Name & Address of School				Major or Specialized				Check Yr. Completed				Graduate? Give Degree	
	High School										1 2 3 4				Yes <input type="checkbox"/> No <input type="checkbox"/>	
	College										1 2 3 4					
	College										1 2 3 4					
	Grad. School										1 2 3 4					
	Bus. Trade School										1 2 3 4					
	Corresp. or Night School										1 2 3 4					
	Research Studies, Publications, Title of Thesis, etc.															
	Business Machine/Other Special Skills															
	Computer Skills															

P.O. Box 100 • Butler, WI 53007
 N50 W13941 Overview Drive • Menomonee Falls, WI 53051
 Ph: (262) 783-8190 • Wisconsin Toll Free 800-242-9398
 Email: HR@MonroeEquipment.com

	List Below the Names of All Your Employers, Beginning with the Most Recent: A. Company B. Location C. Telephone	Kind of Business	Time Employed		Nature of Work at Start	Starting Rate of Pay	Ending Rate of Pay	Last Position (Include Title, Responsibilities, Supervisory Duties if applicable, etc.)	Reason for Leaving	Immediate Supervisor A. Name B. Title C. May we Contact?
			From	To						
			Mo./Yr	Mo./Yr.						
WORK HISTORY	1. A. B. C.									A. 1. B. C.
	2. A. B. C.									A. 2. B. C.
	3. A. B. C.									A. 3. B. C.
	4. A. B. C.									A. 4. B. C.
	5. A. B. C.									A. 5. B. C.
	6. A. B. C.									A. 6. B. C.
	7. A. B. C.									A. 7. B. C.
	8. A. B. C.									A. 8. B. C.

COMMENTS	COMMENTS ABOUT ANY OF THE ABOVE LISTED POSITIONS THAT YOU WANT TO SHARE WITH US:
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MILITARY	U.S. Military Experience	
	Branch of Service	Are you at present a member of any military reserve?
	Highest Rank Achieved	Branch

REFERENCES	References	Address	Telephone
	1.		
	2.		
	3.		
	4.		

Qualifications
Please tell us about your personal qualifications for the work for which you have made application. What are your outstanding accomplishments in this area? What do you feel you can contribute to Monroe Equipment, Inc.?

Have you ever signed an agreement with any of your former employers which might restrict the scope or field of your work with Monroe Equipment or under which you agreed: (a) not to disclose certain kinds of information; (b) not to work for another employer engaged in a competing line of business for a period of time or in a particular territory? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please explain:

APPLICANT - PLEASE READ		
<p>The Fair Credit Reporting Act 91-508 requires that we advise you that a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics, financial responsibility, and mode of living.</p> <p>I agree that my employment with the Company is at the will of the Company, which means that the Company has the right to discharge me for any reason whatsoever. I also understand that I may be terminated or laid off at the discretion of the Company. I expressly agree and understand that this is the entire agreement between the Company and myself on the subject of discharge, termination, and/or layoff, and it may be changed only by an agreement in writing, signed by the Company. I agree to conform to the Company's policies and rules, which are subject to change without prior notice, and I also agree that I shall be subject to other conditions which the Company may adopt. I affirm that the information on this application is true and complete, and that any intentional deception herein may be considered sufficient cause for dismissal. I also give the Company permission to contact all listed employers and references and to request official transcripts of grades from all listed schools. I further release and agree to hold harmless the Company and all parties providing information from all liability for any claim or damage that may result from furnishing such information to you. I also authorize you to obtain information regarding my record with the Bureau of Motor Vehicles if the job for which I am applying will require driving as part of my job duties.</p>		
Date	Driver's License #	Signature of Applicant
EQUAL OPPORTUNITY EMPLOYER		

APPLICANT - DO NOT WRITE IN THE SPACE BELOW

Interviewer - Dates

Comments

References Checked

Results _____

Previous Employers Checked

Results _____

Test Administered

Results _____

Physical Examination

Results _____

Consider

Refer To _____

Discuss With _____

Advise Applicant By _____

Reject

File - No Action Required

Advise Applicant By _____

Applicant Not Interested _____

Special Handling

Above Action Completed On _____

Signed _____

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