



531 S. Hwy. 59, Merced, CA 95340 • 209-722-4145 / Fax 209-722-4359

APPLICANT INFORMATION

Last Name		First		M.I.		Date	
Street Address				Apartment/Unit #			
City			State		ZIP		
Phone			E-mail Address				
Date Available			Position Applied for				
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				

EDUCATION

High School				Address				
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
College				Address				
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other				Address				
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	

REFERENCES

Please list three professional references.

Full Name				Relationship			
Company				Phone			
Address							
Full Name				Relationship			
Company				Phone			
Address							
Full Name				Relationship			
Company				Phone			
Address							

PREVIOUS EMPLOYMENT

Company				Phone			
Address				Supervisor			
Job Title							
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>					

Company		Phone
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers
 Initials given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize **Laird Mfg.** to thoroughly investigate my references, work record, education and other matters related to my suitability for
 Initials employment unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired,
 Initials is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

_____ In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete
 Initials the required employment eligibility verification document form upon hire.

Signature:

Date: