



Cardinal
 301 McSwain Drive
 Fremont, IN 46703

APPLICATION FOR EMPLOYMENT

Cardinal believes in Equal Employment Opportunity. This means that the company complies with laws that applicants for employment and current employees not be discriminated against due to race, color, creed, national origin, ancestry, sex, age, disability, marital status, sexual orientation, membership in military service, arrest/conviction record, or other protected categories. This EEO policy includes hiring, placement, promotion, training, rates of pay, lay-off, termination, and other terms and conditions of employment.

PERSONAL INFORMATION

NAME: _____
 Last First Middle

ADDRESS: _____
 Street

City State Zip Code

PHONE: _____ **E Mail Address:** _____

Are you at least 18 years old? Yes No

Are you a United States citizen or do you have an entry permit which allows you to lawfully work in the U.S.? Yes No

Have you ever been convicted of a crime that has not been expunged by a court? Yes No If yes, state the nature of the conviction, the date, and the court? _____

*A conviction will not necessarily disqualify you from consideration for employment. The effect of a conviction will be assessed with respect to time, circumstances, seriousness of the offense, and job responsibilities and duties. However, your failure to list a conviction (except convictions protected from disclosure by applicable law) will disqualify you from consideration for employment or may result in termination of employment if subsequently discovered.

EMPLOYMENT DESIRED

POSITION: _____ **DATE AVAILABLE TO START:** _____

ARE YOU EMPLOYED NOW? Yes No

MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? Yes No

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? _____ WHEN? _____ WHERE? _____

*WHO REFERRED YOU TO THIS COMPANY: _____ Friend/Relative: _____

Our Advertisement (please indicate which newspaper), _____ No One _____

ARE YOU AVAILABLE FOR:

1 st SHIFT	Yes	No
2 nd SHIFT	Yes	No
3 rd SHIFT	Yes	No

All applicants who are conditionally offered employment will be required to pass a drug test and background check. Are you able to perform the essential functions of the job for which you are applying, with or without reasonable accommodations?

Yes No

Education	Name and Location of School	No. of Years Attended	Did You Graduate?	Field of Study
High School / GED				N/A
College / Tech / Other				

*List any special skills or qualifications which you feel are relevant to the job for which you are applying: _____

MILITARY

BRANCH _____ RANK _____ FROM _____ TO _____

Present Membership in National Guard or Reserves _____

EMPLOYMENT HISTORY - Please complete this section even if a resume is attached

LIST EMPLOYERS STARTING WITH YOUR MOST RECENT EMPLOYER. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. PLEASE GIVE MONTH AND YEAR.

COMPANY NAME _____ TELEPHONE NUMBER _____
ADDRESS _____ EMPLOYED From _____ / _____ To _____ / _____
NAME OF SUPERVISOR _____ HOURLY PAY: Start _____ Last _____
POSITION AND RESPONSIBILITIES _____
REASON FOR LEAVING _____

COMPANY NAME _____ TELEPHONE NUMBER _____
ADDRESS _____ EMPLOYED From _____ / _____ To _____ / _____
NAME OF SUPERVISOR _____ HOURLY PAY: Start _____ Last _____
POSITION AND RESPONSIBILITIES _____
REASON FOR LEAVING _____

COMPANY NAME _____ TELEPHONE NUMBER _____
ADDRESS _____ EMPLOYED From _____ / _____ To _____ / _____
NAME OF SUPERVISOR _____ HOURLY PAY: Start _____ Last _____
POSITION AND RESPONSIBILITIES _____
REASON FOR LEAVING _____

REFERENCES

Give the names of two people (not related to you) whom you have known at least one year.

Name	Phone Number	Business	Acquainted How	Years
1.				
2.				

PLEASE READ CAREFULLY, THEN SIGN AND INITIAL WHERE INDICATED

I hereby authorize you to investigate my background. I authorize and request all persons, companies, and organizations to furnish any information about me requested by you. I release from liability any person, company, or organization furnishing such information. I certify that all statements are truthful and accurate. In the event any of the above statements are false, I understand, if employed, that I will be subject to dismissal.

I understand that: This application is not an offer of employment; that by accepting this application, you do not guarantee that I will be offered a position. If employed, I agree to abide by all of the work and safety rules of the Company. I understand that this Company is committed to maintaining a drug and tobacco-free workplace. I have read, understand, and agree to the above statement. (Please initial here). _____

**Smoking is prohibited by state law within 8 feet of our entrances.

DATE

SIGNATURE

Updated : 4/29/15