



EMPLOYMENT APPLICATION

POSITION APPLYING FOR: _____			
DESIRED SALARY: _____ PER _____ (year, month, hour)			
NAME: (Last) _____		(First) _____	(Middle) _____
MAILING ADDRESS: (Street, Apt., Box) _____			(Area Code) HOME TELEPHONE _____
(City) _____	(State) _____	(Zip Code) _____	(Area Code) ALTERNATE TELEPHONE _____
If hired, can you furnish proof that you are at least eighteen (18) years old? (<i>circle one</i>) Yes No			
EDUCATION: Highest level completed (<i>circle</i>): 1 2 3 4 5 6 7 8 9 10 11 12 GED			
Highest Level of College (<i>circle</i>): 1 2 3 4 5 6 7 8			
SCHOOL & LOCATION: (Include high school, college, technical school, U.S. Military Schools, and others, listing most recent school first.)		Diploma or Degree	Major
Grade Point Average			
REFERENCES: List persons, other than relatives and immediate supervisors, who are able to comment on your competence.			
Name		Address	Telephone
_____		_____	_____
_____		_____	_____
_____		_____	_____
Do you have any relatives working at Massa? (<i>circle one</i>) No Yes If yes, name(s): _____			
Have you been referred to us by someone? (<i>circle one</i>) No Yes If yes, name(s): _____			
SKILLS: List any skills, training or other qualifications which you feel are applicable to the position for which you are applying for employment.			Skill Level (if applicable)

WORK HISTORY: List present or most recent employer first. Include period(s) of U.S. Military service and verified work performed on a voluntary basis (use additional sheets if necessary).

From _____ To _____ Month/Year (mm/yyyy)	Employer _____ Address _____ City _____ State _____ Zip Code _____ Supervisor _____ Phone _____ Reason for Leaving: _____	Duties: _____ _____ _____ _____ _____ May we contact this Employer? (<i>circle one</i>) Yes No
From _____ To _____ Month/Year (mm/yyyy)	Employer _____ Address _____ City _____ State _____ Zip Code _____ Supervisor _____ Phone _____ Reason for Leaving: _____	Duties: _____ _____ _____ _____ _____ May we contact this Employer? (<i>circle one</i>) Yes No
From _____ To _____ Month/Year (mm/yyyy)	Employer _____ Address _____ City _____ State _____ Zip Code _____ Supervisor _____ Phone _____ Reason for Leaving: _____	Duties: _____ _____ _____ _____ _____ May we contact this Employer? (<i>circle one</i>) Yes No

To aid in our verification efforts, please list any other name(s) you may have used during previous employment:

CERTIFICATION:

I further certify that all answers to questions on this application are true and correct without consequential omissions of any kind and I understand that misrepresentation is sufficient grounds for refusal to hire, or if hired, immediate dismissal. I hereby authorize Massa Products Corporation (the Company) to verify my former employment and secure additional information if necessary. I release all persons and companies from all liability for any damage which may result from furnishing such information to the Company.

I understand that if I am employed by the Company that such employment will be at-will, and that either I or the Company may terminate the employment relationship, with or without cause, at any time.

DATE: _____ **SIGNATURE OF APPLICANT:** _____

Our Company is committed to a policy of nondiscrimination and equal opportunity for all employees and qualified applicants without regard to race, color, religion, national origin, ancestry, sex, age, veteran status, disability, or sexual orientation.