



# Excel Boat Company LLC

## Employment Application Page 1 of 3

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

### Applicant Information

Date \_\_\_\_\_

First name \_\_\_\_\_ Last name \_\_\_\_\_ Middle name \_\_\_\_\_

Street Address \_\_\_\_\_ Email Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone \_\_\_\_\_ Message Phone \_\_\_\_\_

Position applied for \_\_\_\_\_

When can you start? \_\_\_\_\_ Desired Wage \$ \_\_\_\_\_

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis?

(You may be required to provide documentation.)  Yes  No

Have you ever worked for this company?  Yes  No

If yes, please explain \_\_\_\_\_

Have you ever interviewed for a job with this company?  Yes  No If Yes, When: \_\_\_\_\_

Have you ever been convicted of a felony? (This will not necessarily affect your application.)

Yes  No

If yes, please describe conditions. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Training/Certificates

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Skills- Mark all that apply:

<input type="checkbox"/>	Mig Welder	<input type="checkbox"/>	Brake Press	<input type="checkbox"/>	Forklift Certified	<input type="checkbox"/>	Hand Sanding
<input type="checkbox"/>	Tig Welder	<input type="checkbox"/>	CNC Machine	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Electrical
<input type="checkbox"/>	Aluminum Welder	<input type="checkbox"/>	Shear Operation	<input type="checkbox"/>	Wiring	<input type="checkbox"/>	Chop Saws
<input type="checkbox"/>	Paint	<input type="checkbox"/>	Read blueprints	<input type="checkbox"/>	Graphics	<input type="checkbox"/>	Read a Tape Measure
<input type="checkbox"/>	Paint Prep	<input type="checkbox"/>	Assembly	<input type="checkbox"/>	Plumbing	<input type="checkbox"/>	Other:

In addition to the above and your work history, are there other skills, qualifications, or experience that we should consider?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Employment History (Start with most recent employer)**

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

\_\_\_\_\_

Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

\_\_\_\_\_

Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**References- Please List three professional references:**

**((Must not be related to you))**

Full Name \_\_\_\_\_ Company \_\_\_\_\_

How Long Known \_\_\_\_\_ Phone Number \_\_\_\_\_

Full Name \_\_\_\_\_ Company \_\_\_\_\_

How Long Known \_\_\_\_\_ Phone Number \_\_\_\_\_

Full Name \_\_\_\_\_ Company \_\_\_\_\_

How Long Known \_\_\_\_\_ Phone Number \_\_\_\_\_

Attach additional information if necessary.

- This job may require you to lift up to 75lbs, frequently throughout the average workday. Please indicate whether or not you are capable of performing this type of task.

Yes \_\_\_\_\_

No \_\_\_\_\_

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Excel Boat Company is a Drug Free Work Facility. Applicants who are hired must be willing to submit to a pre-employment Drug Screen as well as post accident and reasonable suspicion causes.