

OTTO-TECH MACHINE CO., INC.
APPLICATION FOR EMPLOYMENT

Please fill in your name as it appears on your Social Security Card:

Name: _____
(First) (Middle) (Last)

Please fill in your address as to where you receive your mail:

Address: _____
(Street #/PO Box)

(City) (State) (Zip)

Telephone #:(_____)____ - _____ Cell #(_____)____ - _____

Date of Birth: _____/_____/_____

Are you eligible to work in the United States? Yes____ No____

If you are under age 18, do you have a employment/age certificate? Yes____ No ____

Do you have your own transportation? Yes____ No____

If no, please explain how you will be getting to work. _____

Do you have a valid Drivers License? Yes____ No____

if yes, what is the issuing state. _____

Position applied for: _____

Days/Hours available: _____

EDUCATION:

Name and address of school-Degree/Diploma- Graduation Date

Skills and Qualifications: Licenses, Skills ,Training, Awards

FORMER EMPLOYMENT HISTORY:

Please list the name, addresses and your job position of the company/companies for which you worked for over the past 10 years starting with most recent. If more room is needed, please use a separate sheet of paper.

May we contact your present employer? Yes _____ No _____

COMPANY NAME

ADDRESS

1) _____
Supervisor _____ Phone: _____
Length/date of employment: From: _____ To: _____
Job title/duties _____
Reason for leaving: _____
Hourly Starting Salary:\$ _____ Ending Salary: _____

2) _____
Supervisor _____ Phone: _____
Length/date of employment: From: _____ To: _____
Job title/duties _____
Reason for leaving: _____
Hourly Starting Salary:\$ _____ Ending Salary: _____

3) _____
Supervisor _____ Phone: _____
Length/date of employment: From: _____ To: _____
Job title/duties _____
Reason for leaving: _____
Hourly Starting Salary:\$ _____ Ending Salary: _____

Please List Three References:

Name: _____ Phone: _____
Name: _____ Phone: _____
Name: _____ Phone: _____

I certify that the information in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Your Signature: _____ Date: _____ / _____ / _____

Interviewers signature: _____ Date: _____ / _____ / _____