

# Application for Employment

**Wannemacher Enterprises, Inc.**  
**400 East Hanthorn Road**  
**Lima, OH 45804**

(answer all questions – please print)

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or non-job related disability.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
          First                    Middle                    Last  
Are you over the age of 18?    Yes    No                    Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\*Current Address \_\_\_\_\_  
                                  Street                                    City                                    State                                    Zip Code

\*If at the above resident less than three years, list below all residences for the past three years.

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Have you worked for this company before? \_\_\_\_\_ Dates: From \_\_\_\_\_ To \_\_\_\_\_

Names of any relatives employed by this company \_\_\_\_\_

## GENERAL

Do you have a legal right to work in the United States? \_\_\_\_\_

Are you now employed? \_\_\_\_\_ If not, how long since leaving last employment? \_\_\_\_\_

Have you ever been convicted of a felony?   Yes \_\_\_\_\_   No \_\_\_\_\_

Who referred you? \_\_\_\_\_

## EDUCATION

Circle highest grade completed:   1 2 3 4 5 6 7 8 9 10 11 12                    College:   1 2 3 4

Last school attended \_\_\_\_\_  
                                  Name                                    Address

## EXPERIENCE AND QUALIFICATION

### Clerical Experience and Qualifications (indicate training and experience in the following)

	<u>Training</u>	<u>Years Experience</u>		<u>Training</u>	<u>Years Experience</u>
Accounting			SAP		
Accounts Receivable			Claims		
Accounts Payable			Computer		
Billing			Typing		
Programming			Adding Machine		
Dispatcher			Copier		
TMW Suite			Switchboard		
Rates			Filing		
OS & D					

### Forklift Experience and Qualifications (indicate training and experience in the following)

	<u>Training</u>	<u>Years Experience</u>		<u>Training</u>	<u>Years Experience</u>
Forklift			Order Picking		
Stand Up Forklift			Inventory Control		
Electric Pallet Jack			Loading Semi Trailers		
Shrink Wrap Machine			Unloading Semi Trailers		

## REFERENCES

Name \_\_\_\_\_ Relationship and Title \_\_\_\_\_  
 Company \_\_\_\_\_ Years Known \_\_\_\_\_  
 Work Address \_\_\_\_\_ Telephone No \_\_\_\_\_

Name \_\_\_\_\_ Relationship and Title \_\_\_\_\_  
 Company \_\_\_\_\_ Years Known \_\_\_\_\_  
 Work Address \_\_\_\_\_ Telephone No \_\_\_\_\_

Name \_\_\_\_\_ Relationship and Title \_\_\_\_\_  
 Company \_\_\_\_\_ Years Known \_\_\_\_\_  
 Work Address \_\_\_\_\_ Telephone No \_\_\_\_\_

Name \_\_\_\_\_ Relationship and Title \_\_\_\_\_  
 Company \_\_\_\_\_ Years Known \_\_\_\_\_  
 Work Address \_\_\_\_\_ Telephone No \_\_\_\_\_

## EMPLOYMENT HISTORY

Start with **last or current** position, including military experience, and work back.

Current Employer: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

**TO BE READ AND SIGNED BY APPLICANT**

I certify that I have read and understood all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks that are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

The employer has my permission to obtain information from the Bureau of Worker's Compensation. This includes all medical records, compensation, awards of benefits and any other information contained within my file.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an investigative Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand that misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the employer.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. By my signature below I authorize the release of any and all information listed above.

Print Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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419-225-9060**