



# EMPLOYMENT APPLICATION

An Equal Opportunity Employer

www.arrowheadinc.com

PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE

Date \_\_\_\_\_

Name \_\_\_\_\_ Home Telephone # \_\_\_\_\_

Position Desired \_\_\_\_\_ Cell # \_\_\_\_\_

Street Address \_\_\_\_\_ Social Security # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Referred By \_\_\_\_\_  Internet  School  Radio  
 Employee  Agency  Self

Have you worked for Arrowhead Plastic before? Yes No If so, when? \_\_\_\_\_

Are you legally eligible to work in the United States?	Yes	No
Are you over 18 years of age?	Yes	No
Can you perform the essential job duties?	Yes	No
Are you willing to work overtime?	Yes	No
Do you have reliable transportation?	Yes	No
Are you willing to work any shift?	Yes	No
What is your minimum pay requirement? \$ _____	Shift Preference?	1st 2nd 3rd

Education	School Name, City, and State	# of Years	Diploma/Degree
High School			
College			
Graduate School			
Trade, Business or			
Correspondence			
Other			

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

Date Started	Date Ended	Name of Employer with City and State	Phone # with Area Code	Position Held	Hourly Rate or Salary

List Job Duties & Reason for Leaving: \_\_\_\_\_

Date Started	Date Ended	Name of Employer with City and State	Phone # with Area Code	Position Held	Hourly Rate or Salary

List Job Duties & Reason for Leaving: \_\_\_\_\_

Date Started	Date Ended	Name of Employer with City and State	Phone # with Area Code	Position Held	Hourly Rate or Salary

List Job Duties & Reason for Leaving: \_\_\_\_\_

Have you served in the U.S. Armed Forces? Yes No

What Branch? \_\_\_\_\_ Dates of Duty: \_\_\_\_\_ Rank at separation: \_\_\_\_\_

Briefly describe your duties: \_\_\_\_\_

INCOMPLETE APPLICATION WILL NOT BE CONSIDERED FOR EMPLOYMENT.  
 APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS.

The following skills are representative of tasks performed at Arrowhead Plastic Engineering, Inc. **1.** Please circle the skills you currently possess. **2.** Write in the box where you use these skills (home, work, school, etc.). **3.** List how long you have had these skills ( 6 months, 1 year, etc.).

Air Tools	Assembly	Auto Body Repair	Blue Prints-Reading	Buffers	Cabinet Making	CAD	Caliper	CNC Machinery	CNC Programming
Chopper Gun	Computer	Drill Press	Electric Weld	Fiberglass-RTM	Fiberglass Repair	Forklift	Gel-Coating	Grinders	Grinders
Hand Tools	HVAC	Lay-up Fiberglass	Material Handling	Mechanical	Metal Fabrication	Micrometers	Mold Building	Painting Cars	Pattern Finishing
Power tools	Portable Circular Saw	Radial Arm Saw	Rivet Gun	Router	Saber Saw	Sanders	Small Tool Repair	Table Saw	Tape Measure
Truck Driving	Vacuum Forming	Warehouse	Welding - MIG	Welding - TIG	Welding - ARC	Software Skills	Wood Working	Microsoft Word	Microsoft Excel
Microsoft Access	Microsoft Power Point	Microsoft Outlook	Other Skills:						

Please Summarize Your Skills:

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What Additional Skills would you like to learn?

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Do you have any relatives currently employed by Arrowhead Plastic Engineering, Inc.?  Yes  No

If so, who? \_\_\_\_\_

Have you ever been convicted of a crime?  Yes  No

Person To Be Notified in Case of Emergency:

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Street Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ City & State: \_\_\_\_\_

It is agreed and understood that Arrowhead Plastic Engineering, Inc. or its agents may investigate my background to verify the accuracy of the information given on this application and make routine inquiries during the initial or subsequent processing of my application concerning my character, workplace attendance, and work performance history. I hereby authorize all schools I have attended, and previous employers, to furnish Arrowhead Plastic Engineering, Inc. and its agents all information that they may have concerning me, and I hereby release Arrowhead Plastic Engineering, Inc. and its agents from all liability for any damages resulting from such investigation. Additionally, in applying for a position that may involve driving a Company vehicle, I understand and agree that any serious traffic offense or combination of offenses, whether as a result of on-the-job activity or in operation of a privately-owned vehicle, may disqualify me from employment or continued employment. In addition, I also authorize Arrowhead Plastic Engineering, Inc. to complete a criminal background check.

I understand that both Arrowhead Plastic Engineering, Inc. and I will be free to terminate my employment at any time, with or without cause.

I understand and agree that this application will be used for employment consideration, but it does not guarantee me employment with Arrowhead Plastic Engineering, Inc. I also understand that my application will remain active for a period of ninety (90) days and will remain on file for a period of one (1) year.

I certify that the foregoing information is true and complete to the best of my knowledge. I understand that misrepresentation and/or omission of facts called for on this application may be cause for subsequent dismissal.

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

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

Date of Application: \_\_\_\_\_

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