



Date Application was received: _____

Corporate Office 366 Garfield Ave Duluth, MN 55802
Phone: 218-722-0205 Fax: 218-722-6509
Email: applications@bendtec.com

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, veteran status, non-job related disability, or any other protected group status.

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS TO APPLICANT: Please print answers to all questions and sign in both places on the last page.

Date of Application _____ Position(s) Applied for Office: _____ Shop: _____

Name _____
Last First Middle

Current Address _____
Street City State Zip Code

Home Phone: _____ Cell Phone: _____ How Long at this address? _____
yr/mo

E-mail address: _____

Do you have the legal right to work in the United States? _____

Are you 18 years or older? Yes No (If not you may be required to provide authorization to work)

Have you worked for this company before? _____ Dates: From _____ to _____
How long has it been since leaving your last employment? _____

How did you hear about this company? Advertisement Friend Relative Other _____
Who referred you? _____ Date you would be available to begin work _____

BendTec works three (3) shifts and weekends are you available to work: 1st shift 2nd shift 3rd shift
Full time Part time Temp

Can you travel if a job requires it? Yes No Can you work weekends if need be. Yes No

Work at BendTec Inc includes bending, walking, squatting, climbing, working on your feet, sitting, kneeling, lifting and carrying objects weighing up to 70 pounds, and wearing personal protective equipment (hearing, eye, foot, respirator, etc; protection). Are you able to perform the above listed activities with out reasonable accommodations being made. Yes No

Here at BendTec you must be able to pass a pre-employment drug test and depending on the position a pulmonary test. Would you be willing to do this? Yes No

EMPLOYMENT HISTORY RECORD

Start with your present or most recent job and work backwards in order. List complete mailing address, street number, city, state, and zip code and phone.

Current or Most Recent Employer: Name _____

Address (St./City/State/Zip) _____

Position Held _____ From (mo/yr) _____ To (mo/yr) _____ Rate of Pay _____

Are you presently employed? Yes No May we call your current employer? Yes No

Supervisor _____ Phone Number _____

Why do (did) you want to leave? _____

Duties & Responsibilities: _____

Equipment Experience: _____

Second Last Employer: Name _____

Address (St./City/State/Zip) _____

Position Held _____ From (mo/yr) _____ To (mo/yr) _____ Rate of Pay _____

Supervisor _____ Phone Number _____

Why do (did) you want to leave? _____

Duties & Responsibilities: _____

Equipment Experience: _____

Third Last Employer: Name _____

Address (St./City/State/Zip) _____

Position Held _____ From (mo/yr) _____ To (mo/yr) _____ Rate of Pay _____

Supervisor _____ Phone Number _____

Why do (did) you want to leave? _____

Duties & Responsibilities: _____

Equipment Experience: _____

Fourth Last Employer: Name _____

Address (St./City/State/Zip) _____

Position Held _____ From (mo/yr) _____ To (mo/yr) _____ Rate of Pay _____

Supervisor _____ Phone Number _____

Why do (did) you want to leave? _____

Duties & Responsibilities: _____

Equipment Experience: _____

EDUCATION

Highest Grade Completed: _____

Did you receive your Diploma or GED Equivalent? Yes No

Last School Attended: Name _____ City _____ State _____

Vocational/ Technical/Community College Yes No Did you graduate? Yes No

Courses studied: _____

Majors/Minors: _____

Highest level of math skills learned: _____

MILITARY STATUS: Have you served in the US Armed Forces Yes No Branch: _____

Honorable Discharge? Yes No Date discharged: _____

Describe any job-related training received in the United States Military: _____

List any special courses or training you have taken: _____

Indicate any foreign languages you can speak, read and or/write: _____

Indicate any special driver's licenses or certifications you hold: _____

Describe any specialized training, apprenticeship, skills, vocational or extracurricular activities you may have that will help you in the job you are applying for: _____

List all Machinery you have operated:

List your hobbies or special interest: _____

State any additional information you feel may be helpful to us in considering your application:

Personal/Professional References:

Name: _____ Occupation: _____

Phone : _____ Best Time to Call: _____

Name: _____ Occupation: _____

Phone : _____ Best Time to Call: _____

Name: _____ Occupation: _____

Phone : _____ Best Time to Call: _____

TO BE READ AND SIGNED BY APPLICANT

This certifies that I completed this application, and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature: _____ Date: _____

TO BE READ AND SIGNED BY APPLICANT

I authorize you to make such investigations and inquiries of my personal and employment history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools and other persons from all liability in responding to inquiries and releasing information in connection with my application.

In the event of employment, I understand that false or misleading information given on my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company including holding a valid drivers license if my position requires one.

I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigating my attendance and performance history. I understand that I have the right to:

- Review information provided by previous employers;
- Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

Signature: _____ Date: _____

FOR COMPANY USE

PROCESS RECORD

Past Employers Contacted: (1) _____

(2) _____

(3) _____

Notes on Prospective Employee/References Checked: _____

Applicant Hired _____ Applicant Rejected _____

Date Employed _____ Location Employed _____

Signature of Person Doing Hiring: _____



FABRICATION & BENDING

AFFIRMATIVE ACTION DATA

Please complete and return this form with your employment application

Date: _____

Name (Print): _____

Position Applying for: _____

How did you first learn of this position? _____

Thank you! Your feedback helps us to improve our outreach efforts for future recruitments.

BendTec is an equal opportunity employer. Our state-approved Affirmative Action Program seeks to ensure that employment opportunity information reaches all qualified potential candidates, including African Americans, American Indians/Alaskan Natives, Asians/Pacific Islanders, Caucasians, Hispanics, women, men, persons age 40 and over, persons with disabilities, disabled veterans, and Vietnam era veterans. To implement this program more successfully, we request that you provide the following information. Submission of this statistical information is voluntary; failure to complete this portion of the application will not adversely affect your candidacy for employment.

This information will be separated from your application and handled confidentially by our Officer for Equal Opportunity

Please check any/all of the following that apply:

- Male
- Female
- African American/Black
- Asian/Pacific Islander
- Age 40 or older
- Caucasian/White
- Hispanic/Latino
- Person with a disability
- Native American/American Indian/Alaska Native
- Special Disabled Veteran (30% or more disability)
- Vietnam Era Veteran (served 180 days or more between 2/28/61 and 5/7/75 and does not have a dishonorable discharge)