

## **Application for Employment**

Grob Inc. 1731 10th Avenue Grafton, Wisconsin 53024 Phone: (262) 377-1400

Please fill out this application and email it to Employment@Grobinc.com or submit it in person.

		FOR C	FFICE USE	ONLY				
Dept		_			Application Date			
Occupation	_	Application Accepted						
Rate		Clock No						
Full Name	(PLEASE PF	RINT)			Are you at least 18	years old? <b>Y</b>	N	
Current Address					Phone		<del> </del>	
City						Zip Code		
Type of work desired		Wage Expected						
Previously employed h	ere? Y N	From		_ To _	Dept		<del> </del>	
Have any friends or	Name	Relationship						
relatives employed at Grob Inc?		Relationship						
EDUCATION	School Name &	Location	No. Years Attended		Courses of Study	Graduated? Y or N	Degree (s) Held	
High School								
College or University								
Graduate School								
Other								
Mechanical and / or Technic	cal Experience?							
Note:	It is understood that false	e statements on t	this application i	may be co	nsidered sufficient cause for d	ismissal		

The use of this application blank does not indicate there are any positions open and does not in any way obligate this company

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

Please continue on other side

FORMER EMPLOYERS : List below ALL Previous Employers starting with your most recent employment first. If you are working now, present employer and reason for desire to quit must be included. Also give reason for lapse of time where a period of termination of one place of employment does not fit into the next place of employment.

Are you currently en	າployed? Y       N	1
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Are you currently	employed? Y	N				
Name of company	Supervisor Name	Type of work you performed	Wage / Hr.	Started	Left	Reason
Address		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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	·					
	<u> </u>		+			
	1					
-						
May we contact the en	nployers listed abov	e? Y N If no, ind	dicate which	one (s) you	do not wish	us to contact.
Do you have any phys	ical condition which	may limit your ability to perform t	he particular	job for whic	h you are a	pplying?
Y N If yes	, describe such con	idition (Optional) :				
•						
-		e past ten years, excluding misder	meanors and	summary o	ffenses?	
Y N If yes	describe in full:					
Additional Remarks:						
Additional Nemarks.						
_						
Have you ever served	in the Armed Force	s of the United States? Y N				
State Rank and Branc		5 Of the Office Otates: 1				
Are you active duty no		f so stationed where?				
		For Office was Only				
N C W N	Ditt	For Office use Only				
Interview? Y N	Date	Time	<del></del>			
Results of Interview:						
1 toodilo of littor flott.						
  Acceptable Employme	ent?	Starting Wage	Starting C	)ate	Ş	Shift
Interviewed by:		Employed	d by:			
		Approved	l by			