

**APPLICATION**

**FOR**

**EMPLOYMENT**

**RWI Manufacturing Inc, Richards-Wilcox, Aurora Storage Products**

**Name (Please Print)**

|  |
| --- |
| Last |
| First |
| Middle |

RWI Manufacturing Inc. is an Equal Opportunity Employer and will not discriminate among applicants on the basis of race, sex, creed, color, national origin, citizenship, age, marital status, handicap or veteran status.

THIS APPLICATION BECOMES VOID AFTER SIXTY (60) DAYS UNLESS RENEWED

RWI Manufacturing Inc, 600 S Lake Street, Aurora IL 60506

**O:\!!Sales Support\Logo\aurora-logo10-5-2010.jpgPLEASE PRINT**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **GENERAL INFORMATION** | | | | | | | | | | |
| NAME (FIRST-MIDDLE-LAST) | | | | TELEPHONE  HOME  CELL | | | | | DATE | |
| ADDRESS STREET & NO. | | | | | | | NAME OF REFERRAL SOURCE | | | |
| CITY | STATE | | ZIP CODE | | | | SOCIAL SECURITY NUMBER | | | |
| Is additional information relative to a different name  YES  NO  necessary to check your work or education records? If yes, explain. | | | | | | | DO YOU HAVE RELIABLE MEANS OF TRANSPORTATION?  YES  NO | | | |
| POSITION APPLYING FOR | | | | | | WAGES OR SALARY EXPECTED (PLEASE CHECK ONE)    $        HOURLY  WEEKLY  MONTHLY  YEARLY | | | | |
| ARE YOU WILLING TO WORK OVERTIME WHEN REQUIRED?  YES  NO  IF NO, EXPLAIN. | | | | | ARE YOU WILLING TO RELOCATE?  YES  NO | | | DATE AVAILABLE FOR EMPLOYEMENT | | |
| ARE ANY OF YOUR RELATIVES EMPLOYED BY THIS COMPANY? IF YES, LIST NAMES AND RELATIONSHIP.  YES  NO | | | | | | | | | | |
| ARE YOU AVAILABLE TO WORK  PART TIME  FULL TIME | | WERE YOU EVER EMPLOYED BY THIS COMPANY?  YES  NO  IF YES, WHERE? | | | | | | | | DATE |
| WILLING TO WORK ANY SHIFT? IF NO, EXPLAIN.  YES  NO | | | | | | | | | | |

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| **EDUCATION AND TRAINING** | | | | | | | | | | | | | | | | | | |
| NAME AND LOCATION OF HIGH SCHOOL, VOCATIONAL SCHOOL OR COLLEGE. | | | | | | | | LAST YEAR COMPLETED | | DID YOU GRADUATE | | | DEGREE | | COURSE OR MAJOR STUDY | | | GRADE POINT AVERAGE |
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| Other training or skills (factory or office machines operated, special courses, military training, apprenticeship, typing, etc.) | | | | | | | | | | | | | | | | | | |
| LIST LANGUAGES YOU CAN SPEAK FLUENTLY:  LIST LANGUAGES YOU CAN READ AND WRITE: | | | | | | | | | | | | | | | | | | |
| **OTHER JOB RELATED ACTIVITES** | | | | | | | | | | | | | | | | | | |
| LIST PROFESSIONAL, TRADE, BUSINESS OR CIVIC ACTIVITIES AND OFFICES HELD, OR ANY PROFESSIONAL CERTIFICATIONS/LICENSES YOU MAY HAVE. (Do not list any organizations or activities which would reveal protected group status.) | | | | | | | | | | | | | | | | | | |
| IS YOUR AGE UNDER 18: (PLEASE CHECK ONE)  YES  NO | | | | | | | | | | | | | | | | | | |
| IF HIRED, ARE YOU ABLE TO PROVIDE PROOF THAT YOU  ARE LEGALLY ALLOWED TO BE EMPLOYED IN THIS COUNTRY?  YES  NO | | | | | | | | | | | | | | | | | | |
| **UNITED STATES MILITARY SERVICE** | | | | | | | | | | | | | | | | | | |
| DATE ENTERED | DATE OF DISCHARGE | | RANK | | | | BRANCH | | | | | RESERVE OR NATIONAL GUARD STATUS | | | | | ACTIVE  INACTIVE | |
| SERVICE SCHOOL OR SPECIAL TRAINING    O:\!!Sales Support\Logo\RW150dpi2.5x.5.jpgO:\!!Sales Support\Logo\aurora-logo10-5-2010.jpg  **WORK EXPERIENCE**  **BEGINNING WITH LAST OR PRESENT EMPLOYER (Not Necessary to Complete if Information is on an Attached RESUME)**  **Please Cover Employment for Past Ten Years, Including U.S. Military, if Applicable.**  **Use a Separate Piece of Paper if Additional Space is Required** | | | | | | | | | | | | | | | | | | |
| COMPANY NAME | | | | | | | | | | | | | | TELEPHONE  (       ) | | | | |
| COMPANY ADDRESS | | | | | | | | | | | | | | | | | | |
| DATES OF EMPLOYMENT | | | | PAY RATE | | | | | | | TITLE OR POSITION HELD | | | | | | | |
| FROM (MO-YR) | | TO (MO-YR) | | START  **$** | | FINISH  **$** | | | | |
| NAME AND TITLE OF IMMEDIATE SUPERVISOR | | | | | | | | | | | REASON FOR LEAVING | | | | | | | |
| DESCRIPTION OF WORK AND RESPONSIBILITIES | | | | | | | | | | | | | | | | | | |
| COMPANY NAME | | | | | | | | | | | | | | TELEPHONE  (       ) | | | | |
| COMPANY ADDRESS | | | | | | | | | | | | | | | | | | |
| DATES OF EMPLOYMENT | | | | PAY RATE | | | | | | | TITLE OR POSITION HELD | | | | | | | |
| FROM (MO-YR) | | TO (MO-YR) | | START  **$** | | FINISH  **$** | | | | |
| NAME AND TITLE OF IMMEDIATE SUPERVISOR | | | | | | | | | | | REASON FOR LEAVING | | | | | | | |
| DESCRIPTION OF WORK AND RESPONSIBILITIES | | | | | | | | | | | | | | | | | | |
| COMPANY NAME | | | | | | | | | | | | | | TELEPHONE  (       ) | | | | |
| COMPANY ADDRESS | | | | | | | | | | | | | | | | | | |
| DATES OF EMPLOYMENT | | | | PAY RATE | | | | | | | TITLE OR POSITION HELD | | | | | | | |
| FROM (MO-YR) | | TO (MO-YR) | | START  **$** | | FINISH  **$** | | | | |
| NAME AND TITLE OF IMMEDIATE SUPERVISOR | | | | | | | | | | | REASON FOR LEAVING | | | | | | | |
| DESCRIPTION OF WORK AND RESPONSIBILITIES | | | | | | | | | | | | | | | | | | |
| COMPANY NAME | | | | | | | | | | | | | | TELEPHONE  (       ) | | | | |
| COMPANY ADDRESS | | | | | | | | | | | | | | | | | | |
| DATES OF EMPLOYMENT | | | | PAY RATE | | | | | | | TITLE OR POSITION HELD | | | | | | | |
| FROM (MO-YR) | | TO (MO-YR) | | START  **$** | | FINISH  **$** | | | | |
| NAME AND TITLE OF IMMEDIATE SUPERVISOR | | | | | | | | | | | REASON FOR LEAVING | | | | | | | |
| DESCRIPTION OF WORK AND RESPONSIBILITIES | | | | | | | | | | | | | | | | | | |
| **O:\!!Sales Support\Logo\RW150dpi2.5x.5.jpgO:\!!Sales Support\Logo\aurora-logo10-5-2010.jpgPLEASE INDICATE PROFESSIONAL ASSOCIATES WHO COULD BE CONTACTED FOR AN EMPLOYMENT REFERENCE** | | | | | | | | | | | | | | | | | | |
| NAME | | | | | PHONE NO.  (      ) | | | | OCCUPATION | | | | | | | EMPLOYER | | |
| NAME | | | | | PHONE NO.  (       ) | | | | OCCUPATION | | | | | | | EMPLOYER | | |

**PLEASE READ CAREFULLY THE STATEMENT BELOW**

I understand that any employment with the Company is voluntarily entered into and, if employed. I may resign at any time for any reason. Similarly, the Company may terminate the employment relationship at any time for any reason.

I authorize the investigation of all statements contained in this application and further authorize the Company to contact my past employers. My present employer  May  May Not Be Contacted. I certify that all statements and information are true, and acknowledge that any falsification of these facts is cause for separation from the Company’s service.

I understand that any offer of employment made to me by the Company may be made contingent upon my taking a Drug Screening.

|  |
| --- |
| DATE |
| APPLICANT’S SIGNATURE |

**RWI Manufacturing Inc is an Equal Opportunity Employer.**

**OFFICE USE ONLY:**

|  |  |  |  |
| --- | --- | --- | --- |
| Date Employed | | Clock No. | Pay Rate |
| Date | Department | Job Title | Comments |
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Date Terminated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rehire \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**O:\!!Sales Support\Logo\aurora-logo10-5-2010.jpgVOLUNTARY APPLICANT DATA SHEET**

Applicants at RWI Manufacturing Inc. are considered for all positions, and employees are treated during employment without regards to race, color, religion, sex, national origin, age (40+), marital status or veteran status or disability. As a government contractor, we also comply with governmental regulations regarding affirmative action.

In order for us to comply with certain record keeping requirements, we ask that you fill out this document. This information is used solely for governmental reporting and will be kept in a confidential file separate from your application for employment.

**PLEASE PRINT CLEARLY**

**Personal Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | Position Applied for | | | |
| Name | | | Date of Birth | |
| Address | | | Phone (     ) | |
| City | | State | | Zip |
| Social Security Number | | | | |

**Referral Source**

Advertisement  Friend  Relative  Employment Agency  Walk In

Other

**Affirmative Action Information**

Government agencies require periodic reports on the gender and ethnicity of applicants. This data is for analysis and affirmative action only. ***Submission of information is voluntary.***

Gender:  Male  Female

Ethnic Group:  White  Black  Hispanic

American Indian/Alaskan Native  Asian/Pacific Islander

**Definitions:**

White-(Not of Hispanic origin) All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

Black-(Not of Hispanic origin) All persons having origins in any of the Black racial groups of Africa.

Hispanic- All persons of Mexican, Puerto Rican, Cuban, or South American, or other Spanish culture or origin, regardless of race.

American Indian or Alaskan Native- All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

Asian of Pacific Islander-All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands and Soma.