

DAHL-TECH, INC JOB APPLICATION

Name _____

Address _____

Phone _____ Emergency # _____

Do you have transportation available? Yes _____ No _____

Days Available for Work Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Hours Available: 1st Shift _____ 2nd Shift _____ 3rd Shift _____

Are you 18 years of age or older? Yes _____ No _____

Education: Did you graduate from: High School _____ GED _____ Vo-Tech _____ College _____

FORMER EMPLOYERS WITHIN LAST 5 YEARS (List below last three employers, starting with last one first)

Date Month & Year	Name & Address of Employer	Phone #	Salary	Position/Duties	Reason for Leaving

Can we call your previous employer? _____

Are there any types of work which you will not do? _____

Is there anything you would like us to now about yourself, while considering you for this position?

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give Dahl-Tech, Inc. any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties, including Dahl-Tech, Inc. from all liability for any damage that may result from furnishing same to Dahl-Tech, Inc.

I understand and agree that by filing out this application I am in no way guaranteed a job. If employed, I agree that if at any time I make claims against Dahl-Tech, Inc. for personal injuries, upon request I will submit myself to examination by a physician or physicians of Dahl-Tech, Inc.'s selection as often as may be requested.

Date _____ Signature _____