

APPLICATION FOR EMPLOYMENT
(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

**Industrial ● Janitorial ● Bar
Paper & Commercial Kitchen Supplies**



Call the Leader

1711 West Stewart Avenue ● PO Box 449 ● Wausau WI 54402-0449
715-845-8281

CTL COMPANY, INC. is an equal employment opportunity employer dedicated to a policy of nondiscrimination in employment based upon an individual's race, color, creed, religion, age sex, national origin, ancestry, marital status, or the presence of any non-job-related medical condition or disability. In reading and answering the following questions, please keep in mind that none of the questions are intended to imply any limitations, illegal preferences, or discrimination based upon any non-job-related information. This application will be given consideration, but its receipt does not imply that the applicant will be employed. Please contact the Operations Manager if you need an accommodation to participate in the application process.

POSITION(S) APPLIED FOR: _____
Type of Work Desired: _____ Full Time _____ Part Time _____ Temporary _____
Date Available to Start Work: _____

PERSONAL DATA

Name _____ Social Security Number _____
Address _____
Street Address City State Zip
Daytime Phone at Which You Can Be Reached: _____ Evening Phone at Which You Can Be Reached: _____
() _____ () _____
area code area code

GENERAL INFORMATION

1. Have you ever applied for a job with this company in the past? If yes, please give the date of application and the position for which you applied. State your name at that time, if different from present name. ___ Yes ___ No
2. Have you ever been employed by this company in the past? If yes, please give dates of employment, position held, and state your name while employed if different from present name. ___ Yes ___ No
3. If hired, will you be able to work during the normal days and hours required for the position(s) for which you are applying? If no, please explain: ___ Yes ___ No
4. Do you have any commitments to another employer that might affect your employment with our company? If yes, please explain. ___ Yes ___ No
5. If hired, can you furnish proof that you are 18 years of age, or if under 18, do you have a permit to work? If no, please explain: ___ Yes ___ No
6. If hired, can you furnish proof that you are eligible to work in the United States? (If unsure of the documents needed to prove eligibility to work in the U. S., we will be happy to explain the legal requirements.) If no, please explain: ___ Yes ___ No

7. Have you been convicted of a felony, or released from prison in the past 10 years? Note: A yes answer does not automatically disqualify you from employment since the nature of the offense, date and type of job for which you are applying will be considered. If yes, please explain: ___ Yes ___ No
8. Are you charged with an unresolved criminal charge (have you been charged with a crime that has not yet resulted in a plea of guilty, court trial, or dropping of the charge)? Note: A yes answer will not automatically disqualify you from employment. If yes, please explain: ___ Yes ___ No

EDUCATIONAL DATA

SCHOOLS ATTENDED	NAME OF SCHOOL AND LOCATION	DID YOU GRADUATE? YES NO	DEGREE/ DIPLOMA/ CERTIFICATE?	MAJOR COURSE OF STUDY
HIGH SCHOOL	CIRCLE HIGHEST GRADE COMPLETED 1 2 3 4 5 6 7 8 9 10 11 12			
TECHNICAL VOCATIONAL BUSINESS OR MILITARY TRAINING				
COLLEGE OR UNIVERSITY				
GRADUATE SCHOOL				
PROFESSIONAL SEMINARS				

Additional JOB-RELATED seminars, short courses, workshops, or other educational experiences:

JOB-RELATED certificates, licenses, equipment qualified to operate, computer hardware and software operated, and other JOB-RELATED special skills and abilities:

TO BE COMPLETED BY ANYONE WHO WILL DRIVE EMPLOYER'S VEHICLE EITHER REGULARLY OR OCCASIONALLY.

TYPE OF DRIVERS LICENSE YOU HOLD <input type="checkbox"/> OPERATORS <input type="checkbox"/> COMM'L OPERATORS <input type="checkbox"/> CHAUFFEUR		STATE	LICENSE #	EXPIRATION DATE
HAS YOUR DRIVER'S LICENSE BEEN REVOKED OR SUSPENDED IN THE LAST 3 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO / IF YES, EXPLAIN				
HOW MANY YEARS HAVE YOU BEEN DRIVING? <input type="checkbox"/> LESS THAN 1 YEAR <input type="checkbox"/> 2-3 YEARS <input type="checkbox"/> OVER 3 YEARS				
ANY RESTRICTIONS ON YOUR LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO / IF YES, EXPLAIN.				
DID YOU HAVE ANY MOVING TRAFFIC VIOLATIONS OR ACCIDENTS IN THE LAST 3 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO / IF YES, SHOW DETAILS BELOW.				
MONTH/YEAR	DESCRIPTION OF VIOLATIONS (NOT PARKING)	MONTH /YEAR	DESCRIPTION OF ACCIDENTS	

WILL YOU ABIDE BY ALL OF THE SAFETY RULES OF THIS COMPANY YES NO
I HEREBY DECLARE ALL OF THE FOREGOING STATEMENTS TO BE COMPLETE AND TRUE, AND AUTHORIZE YOU TO CONSULT MY PREVIOUS EMPLOYERS.

SIGNATURE OF APPLICANT:

EMPLOYMENT HISTORY
PRESENT & FORMER EMPLOYERS
(List Present or Most Recent First)

Attach additional sheet if necessary

Company Name	Date of Employment	From	To
Address	Supervisor (and phone number if known)		
City, State, Zip	Your name when employed, if different from present		
Job Title & Duties	Reason for Leaving		
Final Salary: \$ _____ per	May we Contact? _____ Yes _____ No		

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Please account for any time you were not employed after leaving school in the past ten years (You need not list any unemployment periods of one month or less)

Time Period(s)

Reason(s) for Unemployment

If you were unable to list all past jobs or periods of unemployment on this form, please use an additional sheet.

REFERENCES – LIST THREE INDIVIDUALS WHO ARE NOT FORMER EMPLOYERS OR RELATIVES

<u>NAME</u>	<u>ADDRESS</u>	<u>CITY, STATE, ZIP</u>	<u>PHONE NUMBER</u>	<u>OCCUPATION</u>

OTHER JOB-RELATED EXPERIENCE. Some people gain job-related experience in positions other than as employee. For instance, an accountant may gain experience as a treasurer of a civic or school organization, or a manager may gain experience while working on civic projects, or in school organizations, or in PTA activities. Please list and describe any paid or unpaid activities, honors, experience or training that might aid you in performing the job(s) for which you have applied, and have not been listed previously in this application. (You may omit any activities, honors, memberships or other items that tend to identify your race, sex, national origin, age, disability or other personal traits that you prefer not to disclose.)

Please add any additional information (except that which identifies your race, sex, age, religion, national origin, disability or other non-job-related personal information) that you think may be relevant to a decision to hire you.

IMPORTANT

PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING

Initials

_____ By my signature and initials, I promise that the information provided in this employment application (and accompanying resume, if any) is true and complete, and I understand that any false information or significant omissions may disqualify me from further consideration for employment, and may be justification for my dismissal from employment, if discovered at a later date. I agree to immediately notify the company if I should be convicted of a felony, or any crime involving dishonesty or a breach of trust while my job application is pending, or during my period of employment, if hired.

_____ I authorize any person, school, current employer (except as previously noted), past employer(s), and organizations named in this application form (and accompanying resume, if any) to provide the company with relevant information and opinion that may be useful to the company in making a hiring decision, and I release such persons and organizations from any legal liability in making such statements.

_____ If offered a job that requires it, I give permission for a job-related complete physical examinations, and I consent to the release to the company of any medical information, as may be deemed necessary by the company in judging my capability to perform the essential functions of the work for which I am applying (with or without a reasonable accommodation).

_____ I understand that if my employment is terminated by the company for dishonesty, breach of trust, or any criminal acts, the authorities may be notified and I may be criminally prosecuted. I also understand that, if hired, I may not hold other employment, nor engage in sales, investments or other activities that create a conflict of interest with the company.

_____ I understand that this application does not, by itself, create a contract of employment. I understand and agree that, if hired, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD OF TIME, and may, regardless of the date of payment of my wages or salary, BE TERMINATED AT ANY TIME. I understand that NO PERSON IS AUTHORIZED TO CHANGE ANY OF THE TERMS MENTIONED IN THIS EMPLOYMENT APPLICATION FORM.

Signed: _____ Date _____