



100 N 6th Avenue
 PO Box 248
 West Bend, WI 53095
 (262) 334-1037

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () _____ E-mail Address: _____

Cell Phone: () _____

Date Available: _____

Position Applied for: _____

How did you hear about the position? Advertisement (indicate source) Friend/Relative
 Inquiry Internet Other

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO
 YES NO YES NO

Have you ever filed an application with us before? YES NO If so, when?
 YES NO

Have you ever been employed with us before? YES NO If so, when?
 YES NO

Do you have any friends or relatives who are currently employed here? YES NO If yes, please indicate name and relationship:
 YES NO

If yes, explain: _____

Are you available to work: Full Time (please indicate days and hours available)
 Part Time (please indicate days and hours available)
 Temporary (please indicate days and hours available)

Education

High School: _____ Address: _____

Did you graduate? YES NO
 YES NO

College: _____ Address: _____

Did you graduate? YES NO Degree:
 YES NO

Other: _____ Address: _____

Did you graduate? YES NO Degree:
 YES NO

Describe any specialized training or skills

Are you fluent in a second language? Yes No If yes, please indicate which language: _____

List and describe other skills and/or training: _____

Time Investment Company, Inc

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References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Previous Employment

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Time Investment Company, Inc

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Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

It is the policy of the company to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, national origin, marital status, expunged juvenile records, or pregnancy, and to afford equal opportunities to disabled veterans, veterans of the Vietnam era, and individuals with a disability, any and other characteristic protected by Federal, State, or Local law.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means the Employee may resign and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written documentation or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

I certify that all answers given by me are true, accurate, and complete. I understand that the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) or in my interview will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

Signature: _____ Date: _____