



Are you available to work:

Full Time     Part-Time     Temporary

If part-time, indicate the days and hours you are available to work

\_\_\_\_\_

Are you currently on lay-off status and subject to recall?

Yes     No

Please indicate your desired wages \_\_\_\_\_

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

## EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer #1		Work Performed	
Address			
Telephone Number(s)		<u>Dates Employed</u> From                  To	
Job Title	Supervisor		
Reason For Leaving			
Employer #2		Work Performed	
Address			
Telephone Number(s)		<u>Dates Employed</u> From                  To	
Job Title	Supervisor		
Reason For Leaving			
Employer #3		Work Performed	
Address			
Telephone Number(s)		<u>Dates Employed</u> From                  To	
Job Title	Supervisor		
Reason For Leaving			
Employer #4		Work Performed	
Address			
Telephone Number(s)		<u>Dates Employed</u>	

Job Title	Supervisor	From	To
Reason For Leaving			

If you need additional space, please continue on the reverse side.

Please indicate by number \_\_\_\_\_ any of the above employers whom you **DO NOT** wish us to contact.

**EDUCATION**

	Name And Address of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills, licenses or certifications. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List professional, trade, business or civic activities and offices held.  
*Do not include memberships which would reveal gender, race, religion, national origin, age ancestry, disability or other protected status:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Job References:**

Please list three **professional, business, or educational references** that we can contact to verify your work experience, and work ethics.

Name	How do you know this person	Phone number

---

**Applicant's Statement**

---

IT IS VERY IMPORTANT THAT YOU READ THIS SECTION CAREFULLY, AND THAT YOU FULLY UNDERSTAND IT BEFORE YOU SIGN IT. THIS SECTION AFFECTS YOUR LEGAL RIGHTS. IF YOU HAVE ANY QUESTIONS PLEASE ASK BEFORE YOU SIGN THIS APPLICATION.

I certify that answers given herein are true and complete to the best of my knowledge.

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. If I wish to be considered for employment beyond this time period I 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 HDM Hydraulics is of an "at will" nature, which means that the Employee may resign at any time 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 document or by conduct unless such change is specifically acknowledged in writing by the HDM Hydraulics General Manager or his/her designee.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

*Proof of eligibility to work in the US will be required upon employment.*

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

---

**Consent and Authorization to Release Employment/Educational Information**

---

I, \_\_\_\_\_, understand and agree that HDM Hydraulics, any agent acting on their behalf, as well as any other person responding to a reference request pursuant to this application, can and will seek and/or disclose any and all information about me which said corporation, agent, or person may have. I specifically authorize said disclosure and agree to hold all such corporations, agents, or persons harmless for same. That is, I will not file a lawsuit, claim, or charge against them for such disclosure. Nor will I threaten same or otherwise seek any kind of compensation for such disclosure.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

HDM Hydraulics provides equal employment opportunity to all applicants and employees without regard to race, color, sex, age, disability, religion, creed, national origin, genetic predisposition, marital status, sexual orientation, gender identity or expression, political belief or activity, veteran status, victims of domestic violence, association, or any other status protected by law.

The policy applies to all areas of employment, including recruitment, hiring, training and development, promotion, transfer, termination, layoff, compensation benefits, social and recreational programs, and all other conditions and privileges of employment in accordance with applicable federal, state, and local laws.

