

Challenger Pallet & Supply

Application for Employment

Pre-employment Questionnaire
An Equal Opportunity Employer



PLEASE PRINT LEGIBLY

PERSONAL INFORMATION

Name (Last, First, MI)		For which plant are you applying?		
Mailing Address	Apt No.	City	State	Zip
Physical Address	Apt No.	City	State	Zip
Email Address		Phone		

LAST

DESIRED EMPLOYMENT

Position		Date You Can Start	Salary Desired
<input type="radio"/> FULL TIME <input type="radio"/> PART TIME DAYS____ NIGHTS____	TIMES AVAILABLE IF PART TIME IF PART TIME, WHICH DAYS OF THE WEEK ARE YOU AVAILABLE : _____		
Are You Employed Now? <input type="radio"/> YES <input type="radio"/> NO	If So May We Inquire of Your Present Employer <input type="radio"/> YES <input type="radio"/> NO		
Ever Applied to This Company Before? <input type="radio"/> YES <input type="radio"/> NO	Where?	When?	
Ever Worked for This Company Before? <input type="radio"/> YES <input type="radio"/> NO	Where?	When?	
Reason for Leaving			
Name of Last Supervisor at this Company			
Who Referred You To this Company?			
<input type="radio"/> Employment Agency	<input type="radio"/> Newspaper Advertising	<input type="radio"/> Friend	<input type="radio"/> Other
<input type="radio"/> College Placement Service	<input type="radio"/> Walk In	<input type="radio"/> State Employment Office	

FIRST

MIDDLE

EDUCATION

School Level	Name and Location of School	Subject Studied	No. of Years Attended	Did You Graduate?
High School			1 2 3 4	<input type="radio"/> YES <input type="radio"/> NO
College			1 2 3 4 5 6 7 8	<input type="radio"/> YES <input type="radio"/> NO
Trade, Business or Correspondence School			1 2 3 4	<input type="radio"/> YES <input type="radio"/> NO
Special Training				
Special Skills				

FORMER EMPLOYERS

List below last three employers, starting with the most recent one first.			
Name of Present or Last Employer			
Address		City	State Zip
Starting Date	Leaving Date	Job Title	
Weekly Starting Salary	Weekly Final Salary	May We Contact Your Supervisor? <input type="radio"/> YES <input type="radio"/> NO	
Name of Supervisor and Title			Phone
Description of Work			
Reason for Leaving			

Name of Previous Employer			
Address		City	State Zip
Starting Date	Leaving Date	Job Title	
Weekly Starting Salary	Weekly Final Salary	May We Contact Your Supervisor? <input type="radio"/> YES <input type="radio"/> NO	
Name of Supervisor and Title			Phone
Description of Work			
Reason for Leaving			

Name of Previous Employer			
Address		City	State Zip
Starting Date	Leaving Date	Job Title	
Weekly Starting Salary	Weekly Final Salary	May We Contact Your Supervisor? <input type="radio"/> YES <input type="radio"/> NO	
Name of Supervisor and Title			Phone
Description of Work			
Reason for Leaving			

REFERENCES

List 2 professional and 1 personal reference that you are not related to and whom you have known at least one year.

	Name	E-Mail Address or Mailing address	Phone Number	Years Acquainted
1				
2				
3				

PERSONAL DATA

Are you 18 years of age or older?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Citizenship: Will you be able to provide proof of identity and employment eligibility if hired?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you ever been convicted of any felony or misdemeanor crime for which you were fined \$100 or more and/or confined in jail for more than one day within the past seven years? If yes, please describe:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(NOTE: A conviction record will not necessarily disqualify an applicant from employment.)		

AUTHORIZATION

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. IF EMPLOYED, I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. I UNDERSTAND THAT IF I AM EXTENDED AN OFFER OF EMPLOYMENT IT MAY BE CONDITIONED UPON MY SUCCESSFULLY PASSING A COMPLETE PRE-EMPLOYMENT PHYSICAL EXAMINATION. I CONSENT TO RELEASE OF ANY OR ALL MEDICAL INFORMATION AS MAY BE DEEMED NECESSARY TO JUDGE MY CAPABILITY TO DO WORK FOR WHICH I AM APPLYING. **I AGREE TO COMPLY WITH THE EMPLOYER'S SUBSTANCE ABUSE PROGRAM, INCLUDING DRUG AND/OR ALCOHOL TESTING AS MAY BE REQUIRED.**

CHALLENGER PALLET DOES NOT DISCRIMINATE BASED ON RACE, COLOR, RELIGION, SEX, AGE, NATIONAL ORIGIN OR DISABILITIES.

DUE TO THE STRENUOUS CONDITIONS THAT YOU WILL BE REQUIRED TO WORK UNDER, IT IS VALID THAT SOME REQUIREMENTS BE FULFILLED IN CONSIDERING EACH PERSON FOR THE JOB. AS A PRODUCTION OR MAINTENANCE WORKER, YOU MAY BE REQUIRED TO LIFT UP TO 115 POUNDS, YOU MUST BE CAPABLE OF WORKING IN ACTIVE CONDITIONS AS WELL AS COMFORTABLE WITH WORKING EXPOSED TO THE WEATHER CHANGES THAT OCCUR IN THIS CLIMATE. YOU WILL BE WORKING IN A BUILDING WITHOUT AIR CONDITIONING. THE WORK IS OFTEN USES REPETITIVE MOTION, STANDING FOR LONG PERIODS OF TIME AND MANUAL LABOR. **YOU MUST BE ABLE TO FULFILL THE ESSENTIAL FUNCTIONS OF THE JOB.**

MY SIGNATURE ACKNOWLEDGES MY ACCEPTANCE OF THESE TERMS.

YES NO

Date

Applicant's Signature