General Products Machine Shop, Inc. 3661 Pole Line Road – Pocatello, Idaho 83201 An Equal Opportunity Employer

Employment Application

Personal Information:					
Name:			;	SSN:	
Last	First		Middle		
Address:					
Street		City		State	Zip Code
Home Phone: () Wor	k Phone: ()	Cell P	hone: ()_	
Position Applied For:	Are	e you curren	tly employed:	Wage	ə:
May we contact your present employer?	Conta	ct Name/Nu	mber/Position: _		
Education:					
 a. Check highest grade completed: □ 8 □ b. If you did not complete high school, do you c. Check number of years of post high school 	u have a hig	h school eq			no
Name and location of Institution	Degi	ree Receive	d	Major	Dates Attended
1					
2					
3					
3					
and expected completion date: Experience: Highlight your knowledge, skills					s for this position.
lob Title					
Job Title: Employer:		Duties	s Included:		
Address:		Datio	moladea.		
Phone:					
Type of Business:					
Immediate Supervisor:					
Salary: (start) (finish)		Equip	ment Used:		
Dates: (mo/yr) to (mo/y	r)				
☐ Full-time ☐ Part-time	,	Reaso	on for Leaving:		
Job Title:					
Employer:		Duties	s Included:		
Address:		Datio	moladea.		
Phone:					
Type of Business:					
Immediate Supervisor:					
Salary: (start) (finish)		Fauin	ment Used:		
Dates: (mo/yr) to (mo/y	r)	Equip			
☐ Full-time ☐ Part-time	• /	Reaso	on for Leaving:		
_ : -: -: -: -: -: -: -: -: -: -: -: -: -			g. = 0 a v ii i g.		

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Experience (continued)	١
	Continuca	,

Job Title:			
Employer:		Duties Included:	
Address:			
Phone:			
Type of Business:			
Immediate Supervisor:			
Salary: (start)	(finish)	Equipment Used:	
Dates: (mo/yr)	to (mo/yr)		
☐ Full-time ☐ Part-time	(6,).)	Reason for Leaving:	
o. Check what job status you	would accept. □ Full-time	Pay ☐ Swing ☐ Night ☐ Weekends ☐ Part-time kills, and abilities for the position you are	applying for?
d. What else should we know you apart from the other appli		hich was not mentioned above? List anyt	hing that might set
e. When will you be available	cants.	onth Day Year	hing that might set Years Known
e. When will you be available	to start work? Mo	onth Day Year	
e. When will you be available References:	to start work? Mo	onth Day Year	
e. When will you be available References: Name 1. 2. I hereby certify that all en falsification of information	to start work? Mo	onth Day Year	Years Known rstand that any part to any