



MOORFEED CORPORATION APPLICATION FOR EMPLOYMENT Equal Opportunity Employer

1. Name _____
Last First Middle

Please List all other names under which you have worked, attended school, served in the US Armed Forces or been convicted of a crime:

Name _____
Last First Middle

2. Present Address: _____
Street City State Zip # of years

Prior Address: _____
Street City State Zip # of years

Prior Address: _____
Street City State Zip # of years

3. Primary Number: () _____ Social Security Number: _____

Alternate Number: () _____ Driver's License Number: _____

4. Position applying for: _____ Employment Desired: Full-time Part-time

Date available to start: _____ Hours/days not available: _____

If hired, how long do you plan to work for Moorfeed? _____

If hired, will you be working anywhere else at the same time? _____ If yes, where?

5. Education
Circle the last year of school completed Name of School Did you graduate? Area of Study

High School 1 2 3 4 _____

College 1 2 3 4 _____

6. Have you been employed by Moorfeed before? _____ If yes, please explain when/where?

7. Do you know anyone employed by Moorfeed either currently or in the past? _____ If yes, please explain

8. Please list any skills you believe are relevant to the position you are applying for? _____

9. How did you learn about the job you are applying for? _____

10. Do you have the legal right to work in the United States of America? _____

11. If an offer of employment is made, will you consent to a drug screen? _____

12) Employment history: List your most recent job first; include any military or volunteer work.
 Explain gaps in employment.

_____	_____ / _____ to _____ / _____	_____ \$ _____
Company Name	Dates Employed	Pay Rate
_____	_____	_____
Address		Supervisor's Name
_____ (_____) _____	_____	_____
Position	Phone Number	Reason for Leaving

_____	_____ / _____ to _____ / _____	_____ \$ _____
Company Name	Dates Employed	Pay Rate
_____	_____	_____
Address		Supervisor's Name
_____ (_____) _____	_____	_____
Position	Phone Number	Reason for Leaving

_____	_____ / _____ to _____ / _____	_____ \$ _____
Company Name	Dates Employed	Pay Rate
_____	_____	_____
Address		Supervisor's Name
_____ (_____) _____	_____	_____
Position	Phone Number	Reason for Leaving

13) Do you have experience in any of the following:

<input type="checkbox"/> Tig Welding	<input type="checkbox"/> Manual Machining	<input type="checkbox"/> CNC Machining	<input type="checkbox"/> Assembly
<input type="checkbox"/> Bowl Fabrication	<input type="checkbox"/> Mig Welding	<input type="checkbox"/> Lathe Work Manual	<input type="checkbox"/> Electrical
<input type="checkbox"/> Tuning	<input type="checkbox"/> Production	<input type="checkbox"/> Lathe Work CNC	<input type="checkbox"/> Traveling Service Tech.

14) Have you ever pled guilty or been convicted of any crime, other than a minor traffic violation, that has not been expunged by a court? If yes, state when, where, and the nature of the conviction.

 (Conviction of a crime is not an automatic bar to employment)

15) Do you foresee any difficulty in being able to meet the attendance requirements or work the job schedule you are applying for? _____ If yes, please explain. _____

16) Please list three work references (not relatives or friends) whom we may contact for references:

Name	Title	Company	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____

I hereby certify that the information provided by me on this application is true, correct, and complete and authorize you to verify my past and present employment, education, credit, and criminal records. I understand and agree that any falsification, omission, or mis-statement on this application is grounds for immediate termination. I understand that neither this document nor any offer of employment constitutes an employment contract. I understand and agree that my employment with EMS is to be of an at-will basis and may be terminated by either party, with or without notice, explanation or cause at any time. I understand that any offer of employment may be contingent upon my ability to pass a drug screen, provide a clean police record regarding convictions, and verification of information contained within this application.

In addition, I understand that this application will be considered active for a period of thirty (30) days. If I have not been contacted within this time and I am interested in employment, I understand that I must complete a new application.

 Applicant's Signature

 Date



Criminal History and Background Check

Employee Printed Name: _____ Date: _____

Purpose of Background Checks

Thank you for considering Executive Management Services, Inc. as an employer. The reputation of any company is built by its outstanding employees. In order to maintain that position, Executive Management Services, Inc. is interested in hiring the best possible person for each position. To ensure that Executive Management Services, Inc. makes the right hiring decision, we use a number of different selection tools and consider a great amount of information before any hiring decision is made.

A criminal history check refers to a review of police records to determine if there is a history of criminal activity. A conviction of a crime does not automatically preclude employment, individual circumstances will be considered. In addition, driving records can be checked for anyone who drives as a part of their job responsibilities. Your offer of employment is contingent on the results of the background check.

Authority to Disclose

By my signature below, I authorize Executive Management Services ("EMS") to conduct a criminal record background check for the purpose of determining whether or not I have a prior job-related conviction. I understand that the background check is a condition of employment, and that an unsatisfactory background check may preclude my employment with EMS.

I further authorize EMS to disclose and release the contents and information contained in my background report on an "as needed" basis to any company at which I may be providing services, which requires such disclosure as a condition precedent to my assignment at their facility. I understand that EMS will only release such information if it is contractually required for my approval by the customer.

Release of Liability

The undersigned applicant does hereby release and forever discharge EMS and their heirs, assigns, successors, representatives, executors, administrators, officers, owners, stockholders, partners, agents, attorneys, and employees from any claim, damage, liability or alleged liability, whether present or future, known or unknown, resulting from the background investigation. The undersigned further releases any and all companies or repositories of criminal records chosen by EMS to conduct such investigations from any claims, damages, liability or alleged liability. The background checks considered herein may include, but are not limited to, reference checks from former employers and educational references, verification and information check with the Social Security Administration, E-Verify Program, criminal courts, state and county repositories of criminal records, national and state sex offender public registries, state departments of motor vehicles, credit bureaus, and employer mutual associations.

Print Full Name _____
First Middle Last

Current Address _____
Street City State Zip

Previous Address _____
Street City State Zip

Social Security # _____ Date of Birth _____

Employee Signature: _____ Date: _____