

Date:

PLEASE
PRINT

Gehman's Application for Employment

Gehman Iron, Inc.

Position(s) Sought

314 S. Water St.
Knoxville, PA 16928
814-326-4150

General Information

Last Name	First Name	Middle Name	Social Security Number - - -
-----------	------------	-------------	---------------------------------

Address	Box No.	Street	Tel. ()
	City	State	E-mail
		Zip Code	

Permanent Address (if different from above)	Box No.	Street	Tel. ()
	City	State	E-mail
		Zip Code	

Are you legally eligible to accept employment in the United States?
Yes No

When are you available to start work?

Have you ever been convicted of a felony?
Yes No

Have you ever filed an application with us before?
Yes No

Education

High School and College or other institutions attended. Begin with most recent.	Course of Study	Years Completed	Degree/Diploma/Certificate

Describe below any specialized training, apprenticeship, or skills relevant to the position(s) sought.

Character References

Please include 3 personal references as to your character. These cannot be relatives.

1.
Name: Telephone: ()

Address:

2.
Name: Telephone: ()

Address

3.
Name: Telephone: ()

Address

APPLICANT'S STATEMENT

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. 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 that the Employee may resign at any time and the Employer may discharge 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 acknowledge in writing by an authorized executive of this organization.

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.

Signature of Applicant

Date

<p>Employer _____ Telephone Number(s) _____</p> <p>Address _____ City _____ State _____</p> <p>Work Performed:</p> <p>Reason for leaving:</p>	<p>Dates Employed: From: To:</p> <p>Hourly Rate / Salary: Starting: Final:</p> <p>Supervisor:</p>
<p>Employer _____ Telephone Number(s) _____</p> <p>Address _____ City _____ State _____</p> <p>Work Performed:</p> <p>Reason for leaving:</p>	<p>Dates Employed: From: To:</p> <p>Hourly Rate / Salary: Starting: Final:</p> <p>Supervisor:</p>
<p>Employer _____ Telephone Number(s) _____</p> <p>Address _____ City _____ State _____</p> <p>Work Performed:</p> <p>Reason for leaving:</p>	<p>Dates Employed: From: To:</p> <p>Hourly Rate / Salary: Starting: Final:</p> <p>Supervisor:</p>
<p>Employer _____ Telephone Number(s) _____</p> <p>Address _____ City _____ State _____</p> <p>Work Performed:</p> <p>Reason for leaving:</p>	<p>Dates Employed: From: To:</p> <p>Hourly Rate / Salary: Starting: Final:</p> <p>Supervisor:</p>