



**MICRO MOLD, Co., Inc.**



**APPLICATION FOR EMPLOYMENT**

*Micro Mold Co., Inc. and Plastikos, Inc. are equal opportunity employers and will not discriminate in the hiring process on the basis of race, color, religion, sex, age, sexual orientation, gender identity, national origin, disability, veteran status, genetic information, or any other characteristic protected by law.*

Date:

Applicant Name:

Present Address:

Telephone Number:

Permanent Address (If different from present address):

Are you 18 years old or older?  Yes  No

Are you authorized to work in the U.S.?  Yes  No

Have you ever worked or attended school under another name?  Yes  No

If yes, under what name?

Have you ever plead guilty or "no contest" to or have you ever been convicted of a crime (including a DUI)?\*

Yes  No

If yes, please provide the details related to each corresponding crime(s), including the location(s)/state(s) and date(s):

*\* Please note: a "yes" answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by applicable law.*

**POSITION DESIRED**

Position:

Date on which you can start work:

Are you able to work:

Weekends\*  Yes  No    Holidays\*  Yes  No    Evenings/Nights\*  Yes  No

*\* If required for the position for which you are applying and/or due to support business needs, customer production and delivery requirements.*

Are you available to work overtime?  Yes  No

Are you related to anyone who currently works at either Micro Mold and/or Plastikos?  Yes  No

If yes, who (please list all)?



**MICRO MOLD, Co., Inc.**

**PLASTIKOS, INC.**  
Custom Injection Molding

Have you previously applied to work for either Micro Mold and/or Plastikos?  Yes  No  
 If yes, please list approximate date(s) of previous applications:

Have you previously worked for either Micro Mold and/or Plastikos?  Yes  No If yes, from \_\_\_\_\_ to \_\_\_\_\_

What was your reason for leaving:

Who was your former supervisor(s) at Micro Mold and/or Plastikos:

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How did you learn about the open position for which you are applying?

Do you have any friends who currently work for either Micro Mold and/or Plastikos?  Yes  No  
 If yes, who?

Are you currently obligated under a non-compete agreement with your current or a previous employer?  Yes  No  
 If yes, the agreement is with: \_\_\_\_\_ for a duration of \_\_\_\_\_ starting on \_\_\_\_\_ and ending on \_\_\_\_\_.

What is your desired starting hourly pay rate/salary:

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**EDUCATION**

High School:	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Technical School:	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University:	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:

Other education or training:

Other special skills:

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**MILITARY EXPERIENCE**

*Micro Mold and Plastikos will not discriminate against any applicant for employment because he or she is a disabled veteran, recently separated veteran, active duty wartime or campaign badge veteran, or Armed Forces service medal veteran in regard to any position for which the applicant for employment is qualified. Micro Mold and Plastikos proudly support our nations' military veterans. Micro Mold and Plastikos view an individual's military service as a strength and an asset, and as such we positively factor military service into the hiring process.*

Branch of Service:	Dates Served: _____ to _____	Rank at Discharge:
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Education and Training:



**WORK EXPERIENCE**

Please list all previous employment, beginning with the most recent. If needed, you may attach additional sheets of paper.

1. Current/Most Recent Employer:			Address:		
From:	to	Position(s) Held:		Reason for Leaving:	
Please list your Supervisor's name, title and phone number:				May we contact him/her? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of Duties:					
Starting Hourly Pay Rate/Salary:			Final Hourly Pay Rate/Salary:		
2. Second Most Recent Employer:			Address:		
From:	to	Position(s) Held:		Reason for Leaving:	
Please list your Supervisor's name, title and phone number:				May we contact him/her? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of Duties:					
Starting Hourly Pay Rate/Salary:			Final Hourly Pay Rate/Salary:		
3. Third Most Recent Employer:			Address:		
From:	to	Position(s) Held:		Reason for Leaving:	
Please list your Supervisor's name, title and phone number:				May we contact him/her? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of Duties:					
Starting Hourly Pay Rate/Salary:			Final Hourly Pay Rate/Salary:		



**PROFESSIONAL REFERENCES**

Please list at least three (3) professional references, preferably work-related individuals, with whom we may contact. If needed, you may attach additional sheets of paper.

Name:	Name:	Name:
Title:	Title:	Title:
Company:	Company:	Company:
Address:	Address:	Address:
Phone Number:	Phone Number:	Phone Number:
Type or Reference: <input type="checkbox"/> Business <input type="checkbox"/> Personal	Type or Reference: <input type="checkbox"/> Business <input type="checkbox"/> Personal	Type or Reference: <input type="checkbox"/> Business <input type="checkbox"/> Personal

**AUTHORIZATION AND ACKNOWLEDGMENTS**

I represent that all information I have provided on this form and otherwise in conjunction with my application for employment is true and complete to the best of my knowledge. I understand that providing any false, incomplete, or misleading information and/or omitting responsive information in connection with this application may be grounds for (i) cancellation of further consideration of this application, or (ii) dismissal from employment if it is discovered after I begin working.

I authorize investigation of all statements contained in this application. I also grant permission to contact all references listed above, and authorize them to release all information concerning my previous employment and any other pertinent information these references might have, personal or otherwise. I hereby waive any and all rights and claims I may have against Micro Mold and/or Plastikos, their agents, employees or representatives for seeking, gathering, and using such information in the employment process, and I release all references, persons, corporations, or organizations from liability for any damage that may result from furnishing this information.

I understand and agree that the company may obtain or have prepared a consumer/investigative consumer report concerning my prior employment, military record, education, credit worthiness, or credit standing, credit capacity, character, general reputation, personal characteristics, criminal background, or mode of living. By signing below, I authorize the company to obtain all such reports.

I understand that Micro Mold and Plastikos maintain a strict drug-free workplace and I agree that I may be asked to submit to pre-employment tests (including a drug test) upon a conditional offer of employment. I also understand that, if employed, I will be subject to the company's personnel policies and procedures, including, where applicable, drug testing.

I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time and without prior notice. I understand that nothing in this application constitutes an employment contract and that the position for which I am applying is at will. I understand that no supervisor, employee, or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the company's president.

If employed, I represent that I will abide by all of the organization's rules and procedures.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_