SCHAEFER Since 1891 SUPPLY

Application For Employment -

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

| | | (PLEASE PRI | NT) | | | | |
|---|------------------|--------------------------------|------------|-------------|--------------|-------------|----------|
| Position(s) Applied For | | | | | Date of Appl | ication | |
| How Did You Learn About | Us? | | | | | | - |
| ☐ Advertisement | | l Friend | □Walk | -In | | | |
| □Employment Agency | . [| l Relative | □ Othe | er | | | |
| Last Name | Eir | rst Name | | Mic | Idle Name | | 7 |
| Last warne | 1.11 | 3t Name | | Wife | raic ivanie | | |
| Address Number | Street | City | | Sta | ite | Zip Code | |
| Telephone Numbers | | | | Social Secu | ırity Number | | - |
| | | | | | | | Position |
| If you are under 18 year eligibility to work? | rs of age can yo | ou provide required | proof of y | our | ☐ Yes | □No | ion |
| Have you ever filed an a | application wit | h us before? | | | □ Yes | □ No | |
| | | | If yes, gi | ve date _ | | | |
| Have you ever been em | ployed with us | s before? | | | ☐ Yes | □No | |
| | | | If yes, gi | ve date _ | | | |
| Are you currently emplo | oyed? | | | | □ Yes | □No | |
| May we contact your p | resent employe | er? | | | ☐ Yes | □No | |
| Are you prevented from | n lawfully beco | ming employed in t | his countr | У | | | |
| because of Visa or Imm Proof of citizenship or imp | 0 | ? I be required upon employ | ıment. | | ☐ Yes | □No | |
| On what date would yo | u be available | for work? | | Dat | | 1110 | Date |
| Are you available to wo | | | | ☐ Shift W | ork | ☐ Temporary | |
| Are you currently on "la | ay-off" status a | and subject to recall | ? | | ☐ Yes | □ No | |
| Can you travel if a job r | equires it? | | | | ☐ Yes | □No | |
| × | . 4 | | | | | | _ |

Education

| ¥ | Name and Address of School | Course of Study | Years Completed | Diploma Degree | |
|---|-------------------------------|--------------------------|------------------------|-------------------|--|
| Elementary School | | | | | |
| High School | 41 | | | | |
| Undergraduate College | | • | | | |
| Graduate Professional | | | | | |
| Other (Specify) | | | | | |
| | A | | 1 | , | |
| 15 | Indicate any foreign | languages you can spe | eak, read and/or write | | |
| - | FLUEN | Т | GOOD | FAIR | |
| SPEAK | | | | | |
| READ | | | | | |
| WRITE | | | | | |
| | | | | | |
| Describe any specialis | zed training, apprentic | eship, skills and extra- | curricular activities. | | |
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| | | | | | |
| Describe and the description of | | | | | |
| Describe any job-related training received in the United States Military | | | | | |
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Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

| ress ephone Number(s) | | From | То | |
|--------------------------|---|--|---|---|
| and a sea Normalia of a | | | | |
| ephone Number(s) | | Hourly Ra | te/Salary | |
| receptione restrict (2) | | Starting | Final | |
| Title | Supervisor | | | |
| son for Leaving | | | | |
| Employer | | Dates Er | nployed | Work Performed |
| | | From | То | |
| dress | | | | |
| ephone Number(s) | , | Hourly Ra Starting | te/Salary Final | |
| Title | Supervisor | | | |
| son for Leaving | | | | |
| Employer | | | | Work Performed |
| dress | | From | 10 | |
| ephone Number(s) | | Hourly Ra | nte/Salary Final | |
| Title | Supervisor | | | |
| ason for Leaving | | | | |
| Employer | | | | Work Performed |
| dress | | 110111 | ,,, | |
| ephone Number(s) | | Hourly Ra | ate/Salary Final | |
| Title | Supervisor | | | |
| ason for Leaving | | | | |
| | son for Leaving ployer ress phone Number(s) Title son for Leaving ployer tress phone Number(s) Title son for Leaving ployer dress phone Number(s) Title | son for Leaving ployer ress ephone Number(s) Title Supervisor looyer lress ephone Number(s) Title Supervisor son for Leaving ployer dress ephone Number(s) Title Supervisor son for Leaving ployer dress ephone Number(s) Title Supervisor | Title Supervisor Son for Leaving Sloyer Dates Er From Tess Sphone Number(s) Title Supervisor Son for Leaving Soloyer Dates Er From Dates Er From Title Supervisor Supervisor Dates Er From Title Supervisor Supervisor Title Supervisor Supervisor From Dates Er From Title Supervisor Supervisor Dates Er From Title Supervisor Dates Er From Dates Er From | Title Supervisor Son for Leaving Sloyer Dates Employed From To To To Tess Suphone Number(s) Title Supervisor Son for Leaving Sloyer Dates Employed From To To Iress Suphone Number(s) Phourly Rate/Salary Starting Final Title Supervisor Dates Employed From To To Iress Suphone Number(s) Title Supervisor Dates Employed From To To Iress Starting Final Title Supervisor Dates Employed From To Iress Suphone Number(s) Hourly Rate/Salary Starting Final Title Supervisor Dates Employed From To Iress Suphone Number(s) Dates Employed From To Iress Supervisor Starting Final Title Supervisor |

| ou may exclude membership w | hich would reveal gender, rac | e, religion, national origin, o | age, ancestry, disability or oth | er protected status: |
|-----------------------------|-------------------------------|---------------------------------|----------------------------------|----------------------|
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Additional Information Other Qualifications Comparison and publish related skills and qualified

| Other Qualifications | | | | |
|---|--------------------------------|--|--|--|
| Summarize special job-related skills and qualifications acquired from employment or other experience. | | | | |
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| Specialized Skills | | | | |
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| State any additional information you feel may be helpful to us in o | considering your application | | | |
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| Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU | U HAVE BEEN INFORMED ABOUT THE | | | |
| REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. | | | | |
| | | | | |
| Are you capable of performing in a reasonable manner, with or without a | | | | |
| Reasonable accommodation, the activities involved in the job or occupation | | | | |
| For which you have applied? A description of the activities involved in such | | | | |
| A job or occupation is attached. | ☐ Yes ☐ No | | | |
| | | | | |
| References | | | | |
| | | | | |
| | | | | |
| 1. (Name) | ()Phone # | | | |
| | PHONE # | | | |
| 2 | () | | | |
| (Name) | Phone # | | | |
| 3 | () | | | |
| (Name) | Phone # | | | |
| 4 | () | | | |
| (Name) | Phone # | | | |
| * | | | | |
| | | | | |

Applicant's Statement

| I certify that answers given herein a | re true and complete to the best of m | y knowledge. | |
|---|---|---|---|
| I authorize investigation of all stater arriving at an employment decision. | ments contained in this application for | employment as may | be necessary in |
| | all be considered active for a period of for employment beyond this time peri hat time. | | 3 |
| relationship with this organization is time and the Employer may dischar that this "at will" employment relat | lge that, unless otherwise defined by a s of an "at will" nature, which means t ge Employee at any time with or with ionship may not be changed by any w edged in writing by an authorized exec | that the Employee made in the cause. It is further ritten document or b | ay resign at any er understood y conduct unless |
| | rstand that false or misleading informa . I understand, also, that I am required | | |
| Signat | ure of Applicant | Date | |
| | FOR PERSONNEL DEPARTMENT USE O | ONLY | |
| Arrange Interview | lo | | |
| | | Interviewer | Date |
| Employed ☐ Yes ☐ No | Date of Employment | | |
| Job Title | Hourly Rate/Salary | Departm | ent |
| Ву | | | |
| | Name and Title | Date | |
| NOTES | | | |
| | | | |
| | | | |
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| F | OR PERSONNEL DEPARTMENT USE ONLY | |
|----------------------------------|----------------------------------|--|
| Position(s) Applied For is Open: | ☐ Yes ☐ No | |
| Position(s) Considered For: | | |
| | | |
| | Date | |
| | | |

NOTES: