



M-B Companies, Inc.
 Human Resources Dept.
 1615 Wisconsin Ave – Box 200
 New Holstein, WI 53061
 800 558-5800

APPLICATION for EMPLOYMENT

<i>Position Applied for</i>	
-----------------------------	--

APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address			Apt / Unit #
City		State	ZIP
Phone #	Alternate Phone #	E-mail	
Date Available	Desired Salary Range		
How did you hear of us?			
If you are under 18 and it is required, can you furnish a work permit? YES <input type="checkbox"/> NO <input type="checkbox"/>			
If NO, please explain:			
Is this application a request for reemployment following an extended military leave of absence from this company? If YES, additional information may be requested. YES <input type="checkbox"/> NO <input type="checkbox"/>			
Type of Employment desired: <input type="checkbox"/> Full Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Educational Co-Op			
Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation) This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law. YES <input type="checkbox"/> NO <input type="checkbox"/>			
<input type="checkbox"/> Need more information about the job's "essential functions" to respond			
Driver's License number:			State
<small>(required if driving may be required in the job for which you are applying)</small>			
Are you a legally eligible for employment in this country? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?			
Answering "yes" to either part of the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.			
Have you ever pleaded guilty or "no contest" to or convicted of a crime? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			



APPLICATION for EMPLOYMENT

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>



APPLICATION for EMPLOYMENT

EDUCATION				
High School			Address	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College			Address	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other			Address	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
Please list three professional references.	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	



M-B Companies, Inc.
 Human Resources Dept.
 1615 Wisconsin Ave – Box 200
 New Holstein, WI 53061
 800 558-5800

APPLICATION for EMPLOYMENT

DISCLAIMER AND SIGNATURE

I certify that all information I have provided in order to apply for the secure work with this employer is true, complete and correct. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contract and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive and all rights and claims I may have regarded the employer, its agents, employees or representatives for seeking gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law. I understand that this application remain current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. The application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implies oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I'm hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

M-B Companies, Inc. does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. M-B Companies, Inc. likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. M-B Companies, Inc. takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT !

I certify that have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant	Date
------------------------	------