

Excel Boat Company LLC

Employment Application Page 1 of 3

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Applicant Information

Date			
First name	Last name	Middle name	
Street Address	Email Address		
City	State	ZIP	
Telephone		_ Message Phone	
Position applied for		Referred by:	
When can you start?	Desired Wa	ge \$	
Are you a U.S. citizen or otherw	vise authorized to work in th	e U.S. on an unrestricted basis?	
(You may be required to provide	e documentation.) \Box Yes \Box	No	
Have you ever worked for this c	company? 🗆 Yes 🗖 No		
If yes, please explain			
Have you ever interviewed for a	a job with this company? \Box	Yes D No If Yes, When:	
Have you ever been convicted o	of a felony? (This will not ne	ecessarily affect your application.)	
Yes No			
If yes, please describe condition	IS		
Training/Certificates			

Skills- Mark all that apply:

Mig Welder	Brake Press	Forklift Certified	Hand Sanding
Tig Welder	CNC Machine	Maintenance	Electrical
Aluminum Welder	Shear Operation	Wiring	Chop Saws
Paint	Read blueprints	Graphics	Read a Tape Measure
Paint Prep	Assembly	Plumbing	Other:

In addition to the above and your work history, are there other skills, qualifications, or experience that we should consider?

Employment History (Start with most recent employer)				
Company Name				
		Telephone		
Date Started	Starting Wage	Starting Position		
Date Ended	Ending Wage	Ending Position		
Name of Supervisor _				
May we contact? \Box Ye	es 🗅 No			
Responsibilities				
Reason for leaving				
Company Name				
		Telephone		
Date Started	Starting Wage	Starting Position		
Date Ended	Ending Wage	Ending Position		
Name of Supervisor _				
May we contact?	Yes 🖵 No			
Responsibilities				
Reason for leaving				
Company Name				
		Telephone		
Date Started	Starting Wage	Starting Position		
Date Ended	Ending Wage	Ending Position		

May we contact? \Box Yes \Box No

Responsibilities

Reason for leaving

References- Please List three professional references: ((Must not be related to you))

 Full Name
 _____Company_____
 Phone Number How Long Known Full Name Company_____ How Long Known Phone Number Full Name Company
 How Long Known
 Phone Number

Attach additional information if necessary.

- This job may require you to lift up to 75lbs, frequently throughout the average workday. Please indicate whether or not you are capable of performing this type of task.
 - Yes No _____

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis.

Signature Date

Excel Boat Company is a Drug Free Work Facility. Applicants who are hired must be willing to submit to a preemployment Drug Screen as well as post accident and reasonable suspicion causes.