

EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, sex, national origin, religion, age, handicap, disability, or marital status.

PERSONAL INFORMAT	TION —										
Name:			First					Middle			
Preferred Name:			Other N	ames Use	d:						
· · · · · · · · · · · · · · · · · · ·											
Street			Apt.	City			State	Zı	ip Code		
Home Phone Number:				Cell Phor	ne Number:						
Email Address:						@)				
EMPLOYMENT DESIRE	ED .										
Position for Which You are A	Date Available				Salary Desired						
Are you employed now?	Yes □ No □	May we m	ake inqu	uiries to yo	our present em	ployer?	Yes□ No□				
Do you have any relatives that	work for SMC?	Yes□	No □	Name 8	Relationship:						
Are you at least 18 years of ag	e?	Yes □	No □								
If you are applying for an outside are you at least 22 years of ac		Yes □	No □	If "No" li	st date of birth	<u>.</u>					
Are you legally permitted to wo	ork in this country?	Yes □	No □								
Will you now, or in the future, r	equire sponsorship		No □	Visa Sta	atus?						
Have you ever been convicted	of a misdemeanor	and/or felor	ny?		Yes □ N	o 🗆					
If "Yes", please list c you from employmen									will not necessa	arily bar	
EDUCATION-Please put t	he highest comple						nplete degrees or e				
Location:					G	raduatio	n Date:				
GED Completed:	Yes □ No □	Name of S	School:_								
Location:					D	ate Obta	ined:				
College	Location City & S		Date Attend		Graduati Date	on	Degree Obtained		Major	GPA	

ERTIFICATIONS / SPECIAL QUALIFICATIONS / SPECIAL QUALIFICATIONS, or subsequently substituted in the control of									
		study or res	earch work related	to the position applied for	.				
MPLOYMENT HISTORY ease list most recent employment to oldest employment	oyment.								
Company Name, Address, and Phone Number	er From / To	Salary	Position	Supervisor	Reason for Leaving				
ECRUITMENT INFORMATION									
ow did you learn about SMC Corporation of A	merica?								
Walk-In ☐ SMC Website	☐ Career/Job W	/ebsite	□ Jol	b Fair/School					
Other:									
Employee Referral (Name):									
Employment Agency (Name):									
APPLICANT'S STATEMENT									
		1040 40 46	haataf may ka		amining in dispetad. I govern a visu				
I certify that answers given herein are to you to contact my present and form	er employers	and inv	estigate all the	e information contai	ned in this application fo				
employment. I hereby release and forefrom any and all claims, known or unk									
information concerning my employmer In the event of employment, I underst	nt.		_		·				
result in discharge. I understand also,									
 Date	Signature								