



EMPLOYMENT APPLICATION

Nordex Advanced Technology, Inc. is an equal opportunity employer. Applicants are considered on the basis of skills, experience and qualifications without regard to race, age, sex, religion, national origin, sexual orientation, marital or veteran status, physical or mental disability, or any other legally protected status.

PERSONAL DATA (please print)

NAME (FIRST, MIDDLE INITIAL, LAST)	SOCIAL SECURITY NO. - -	DATE
ADDRESS (STREET ADDRESS)	(CITY, STATE, ZIP)	TELEPHONE ()
HOW WERE YOU REFERRED?	DRIVING LICENSE	DATE OF BIRTH / /

POSITION

POSITION DESIRED _____ STARTING SALARY DESIRED _____

PLEASE CHECK ALL BOXES THAT APPLY TO YOUR AVAILABILITY (Hours given are approximate and subject to change).

<input type="checkbox"/> First Shift Production 8:30 AM - 5:30 PM	<input type="checkbox"/> First Shift Office 8:00 AM - 5:00 PM	<input type="checkbox"/> Second Shift	<input type="checkbox"/> Regular Employment <input type="checkbox"/> Temporary Employment	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	For temporary or part time, state hours and days available.
---	---	--	--	--	---

WERE YOU PREVIOUSLY EMPLOYED BY NORDEX?
 YES NO

IF YES, COMPLETE THIS SECTION.
Position _____ Supervisor _____
DATES EMPLOYED: _____

DO YOU HAVE ANY RELATIVES CURRENTLY EMPLOYED BY NORDEX? YES NO
Relatives may not report to one another or be placed where employment may cause a conflict of interest.

DO YOU AUTHORIZE A DMV CHECK? YES NO please initial _____

DO YOU AUTHORIZE A CREDIT CHECK AND A CRIMINAL BACKGROUND CHECK? YES NO please initial _____

THIS COMPANY DOES NOT EMPLOY MINORS. ARE YOU AT LEAST AGE 18? YES NO please initial _____

EDUCATION

CIRCLE LAST GRADE COMPLETED: 1 2 3 4 5 6 7 8 9 10 11 12

DID YOU GRADUATE FROM HIGH SCHOOL OR OBTAIN A GED? YES NO

SCHOOL	MAJOR SUBJECTS	YEARS COMPLETED	LAST DATE ATTENDED OR GRADUATION
Junior College/Trade School (Name, location)			
University/Undergraduate (Name, location)			
University/Graduate Level (Name, location)			
Other (Name, location)			

SPECIAL SKILLS

LIST ALL MACHINES AND EQUIPMENT THAT YOU CAN OPERATE. ALSO LIST SPECIAL SKILLS THAT MIGHT QUALIFY YOU FOR EMPLOYMENT.
IF APPLYING FOR OFFICE WORK, WHAT COMPUTER PROGRAMS CAN YOU USE?

WORK HISTORY

List most recent employer first. Use additional paper if needed. You may include military service and training.

Employer	Address (street, city, zip)	Telephone ()
Supervisor's Name & Position	Dates of Employment From: To:	
Type of Business	Position Held	Ending Salary
Reason for Leaving	May we contact now? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Responsibilities		

Employer	Address (street, city, zip)	Telephone ()
Supervisor's Name & Position	Dates of Employment From: To:	
Type of Business	Position Held	Ending Salary
Reason for Leaving		
Responsibilities		

Employer	Address (street, city, zip)	Telephone ()
Supervisor's Name & Position	Dates of Employment From: To:	
Type of Business	Position Held	Ending Salary
Reason for Leaving		
Responsibilities		

Employer	Address (street, city, zip)	Telephone ()
Supervisor's Name & Position	Dates of Employment From: To:	
Type of Business	Position Held	Ending Salary
Reason for Leaving		
Responsibilities		

REFERENCES. List people who know your work. Do not include personal references.

Name	Professional Relationship	Company	Position	Telephone Number
				()
				()
				()

THE FOLLOWING POINTS ARE VERY IMPORTANT. PLEASE READ THEM CAREFULLY BEFORE SIGNING THIS APPLICATION.

I authorize investigation of all statements contained in this application. I will not hold Nordex or any of my previous employers liable in any respect if an employment offer is not forthcoming, is withdrawn, or if my employment is terminated as a result of misrepresentation or omission of facts on this application or on my resume. I understand that if I am employed by Nordex, additional personal data may be required for determination of benefits or statistical purposes.

I understand that if I am employed by NORDEX, my employment is at will, that I or the company may terminate the employment agreement at any time, for any reason, with or without notice, and without further obligation. I also understand that no employee of the Company has the authority to modify the at-will agreement orally or in writing with the exception of the President of the company who must do so in writing.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THE ABOVE STATEMENTS AND UNDERSTAND EACH AND ALL OF THESE STATEMENTS.

Signature (Acknowledgment)

Date

FOR COMPANY USE. DO NOT WRITE IN THIS SECTION.				
HIRED	YES <input type="checkbox"/>	NO <input type="checkbox"/>	POSITION	COMMENTS
Start Date	Starting Salary	Department		
Approved: Supervisor	Approved: Manager	Approved		
		Interviewer	Date	