



EMPLOYMENT APPLICATION

Cera-Met is an equal opportunity employer and does not discriminate against any individual in any phase of employment in accordance with the requirements of local, state, and federal law.

This application will remain active for six months.

PERSONAL				
			-	-
Last Name	First Name	Middle	Area Code & Telephone Number	
			-	-
Street Address	City	State	Zip Code	Area Code & Telephone Number

Are you legally eligible for employment in the U.S.? Yes No
(Upon employment you will be required to submit verification of your legal right to work in the United States.)

Are you 18 years of age or older? Yes No If no, do you have a work permit? Yes No

Have you ever been convicted of a crime or are there any felony charges pending against you?
(A conviction will not necessarily disqualify you for employment. Factors such as the date of the offense, seriousness and nature of the offense, rehabilitation, and the relationship of the offense to the job for which you are applying will be taken into account.)

Yes No If yes, please explain.

Are you subject to an Employee Agreement that conflicts with the performance of your expected duties at Cera-Met?

Yes No If yes, please explain.

Have you ever been employed by Cera-Met? Yes No

If yes, please provide: Department(s): _____ Dates: _____

Have you ever been employed by the government and involved in US Government procurement in any way?

Yes No If yes, please explain in what capacity and the dates of employment:

Are you able to perform the essential function of the job(s) for which you have applied, with or without reasonable accommodations? Yes No If no, please describe any functions which you are not able to perform with or without a reasonable accommodation.

JOB INTEREST

Type of work desired: Managerial Professional Technical Sales
 Office/Clerical Production Skilled Trade Other _____
CHECK ONE Full Time Part Time Temporary Summer Co-op

Will you accept shift work? Yes No N/A **Shift preferred:** Day Afternoon Midnight

(You may, depending on business conditions, be subject to working a shift other than that for which you were hired.)

\$ _____ Per: HR / MO / YR / /

Position Desired	Desired Salary	Check One	Date Available
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How did you learn of this opening?

- Advertisement
- Employment Agency
- Internet
- College Recruiting
- Employment Commission
- Professional Recruiter
- Employee Referral
- Professional Organization
- Other _____

Beginning with the most recent, list your last three jobs, activities or other experience, including volunteer work, part-time employment while in school, military service and self employment. Use additional paper if employment listed below doesn't cover the past **10 years**. If you have ever used another name for employment purposes during this period, please indicate.

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Employer (Present or Most Recent)	Address, City, State, Zip			Telephone Number
Supervisor (Name and Title)	Your Job Title			
/	/	\$	Per: HR / MO / YR	
Employed From (Mo/Yr)	Employed to (Mo/Yr)	Base Rate *	circle one	Bonus Target %
Reason for leaving:				
Description of Your Duties:				
May we contact your present employer for references? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please enter telephone number () ext.				
() -				
Employer (Present or Most Recent)	Address, City, State, Zip			Telephone Number
Supervisor (Name and Title)	Your Job Title			
/	/	\$	Per: HR / MO / YR	
Employed From (Mo/Yr)	Employed to (Mo/Yr)	Base Rate *	circle one	Bonus Target %
Reason for leaving:				
Description of Your Duties:				
() -				
Employer (Present or Most Recent)	Address, City, State, Zip			Telephone Number
Supervisor (Name and Title)	Your Job Title			
/	/	\$	Per: HR / MO / YR	
Employed From (Mo/Yr)	Employed to (Mo/Yr)	Base Rate *	circle one	Bonus Target %
Reason for leaving:				
Description of Your Duties:				

*Base pay is basic rate of pay excluding overtime, premiums, special bonuses or allowances. The rate indicated may be checked with former employer(s).

EDUCATION

	Name of School and Location	Major/Degree	Grade Point Average	Did you Graduate?
High School(s)				
Trade/Business School(s)				
College(s)				
Graduate School(s)				
Other(s)				

Please list any current professional licenses, certifications, or registrations (including state, number, and expiration date):

Please list: Scholastic Honors, Scholarships, Awards, Activities, etc.:

Please list all machinery/equipment you are able to operate:

BUSINESS REFERENCES

To assist us in evaluating your professional background and qualifications, please provide the names of former managers, supervisors, or business associates familiar with your professional experience.

Name	Address	Telephone No.	Occupation
1.			
2.			
3.			

DISCLAIMER OF LIABILITIES

1. If I am offered employment, I understand that I may be required to take a post-offer medical examination before beginning work, in which case the company's offer of employment will be conditioned upon my satisfactory completion of this exam.

When a post-offer medical examination is required, it will be required of all entering employees in the same job category, and the information obtained will be treated as a confidential medical record.

I consent to taking the pre-employment drug test and understand that any offer by Cera-Met will also depend on my satisfactory completion of this test.

2. I verify that the information given by me in this application is true, accurate, and complete. I understand that if I have given any false information on this application or if I have omitted any material facts, I may be disqualified from employment with Cera-Met, or if hired, I may be discharged immediately upon discovery of such false statements or omissions.

I understand and agree that all information furnished in this application will be verified by Cera-Met or its authorized representative. I waive any right I may have to notice from any individuals and organizations named or referred to by me in this application prior to the release of any employment information to Cera-Met. I hereby authorize all individuals in organizations named or referred to in this application any law enforcement organization to give Cera-Met all information relative to such verification and hereby release such individuals, organizations and Cera-Met from any and all liability for any claim or damage resulting therefrom.

3. Cera-Met is prohibited from hiring or actively employing any individual who currently is under indictment, convicted of a crime rendering the individual ineligible for Federal programs, or listed by a Federal agency as debarred, suspended, proposed for debarment or otherwise ineligible for Federal programs. Thus by signing below you allow Cera-Met to make reasonable inquiries into the status of your eligibility for Federal programs. The reasonable inquire shall include, at a minimum, a review of the General Services Administrator's List of Parties Excluded from Federal Procurement of Nonprocurement Programs.
4. I understand that, if hired, I am required to abide by all rules and regulations of Cera-Met and to comply with all policies and procedures. I further understand that Cera-Met's policies and procedures are subject to modification without notice.

I understand that Cera-Met is not obligated to provide employment and that I am not obligated to accept employment. Nothing in this application, or in any prior or subsequent oral or written statement, is intended to create any contract of employment or to create any rights in the nature of a contract of employment. This application does not bind either party for a specific period of time regarding employment. I understand that no one other than the president of Cera-Met or his authorized representative has any authority to enter into any agreement contrary to the foregoing. If hired, I will be an employee at will and nothing in this application shall restrict my right as an employee or the right of Cera-Met as an employer to terminate my employment at any time.

I hereby acknowledge that I have read, understand, and agree to the above statements.

Signature of applicant: _____ **Date:** _____



APPLICANT'S INVITATION TO SELF IDENTIFY FORM

As part of our Affirmative Action Program, we invite females and minority applicants to identify themselves in connection with your application for employment. This is pursuant to Executive Order No. 11246 as amended. **Submission of the information requested on this form is voluntary and refusal to provide it will not subject you to any adverse treatment.** This information will be kept confidential and will be used only in accordance with government regulations.

Please mark all boxes that apply to you:

Sex: Male Female

Minority Status:

- Black or African American:** A person having origins in any of the black racial groups of Africa.
- Asian/Pacific Islander:** A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific islands. This area includes for example, China, India, Japan, Korea, the Philippine Islands, Hawaii and Samoa.
- Hispanic:** A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture regardless of race.
- American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains cultural identification through tribal affiliation or community recognition.
- White:** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Name (please print)

Social Security No.

Signature

Date