Employment application



An equal opportunity employer. It is the policy of Zehnder Rittling to provide equal employment opportunities to all applicants and employees without regard to race, color, religion, sex, age, national origin, sexual orientation, marital status, disability, or any other characteristic protected by law.

Our process of selecting an employee includes substance testing.

You may choose to either mail the completed application to the address below, or email it to: hr@zehnder-rittling.com.

| Name: | | | | Date: | | | |
|----------------------------------|----------------------------|-----------------|------------------|----------------|--------|----------|--|
| First/Middle/Last | | | | | | | |
| email address: | | | | Phone number: | | | |
| Permanent address: | per/Street/Apt. # | | City | | State | Zip Code | |
| Shift Preference: First | Second | ☐ Third | | | | | |
| Applying for: | ne Part time | Summer/se | easonal Co- | -op/internship | | | |
| Days available: Monday Tuesda | ay Uednesday | ☐ Thursday | Friday | Saturday | Sunday | ☐ All | |
| Dates available: / | to/ | | | | | | |
| Minimum required wage: | | | | | | | |
| Desired position: | | | | | | | |
| Are you 18 years of age or old | er? | ☐ No | | | | | |
| Are you lawfully entitled to wor | rk in the United States? | Yes | ☐ No | | | | |
| Have you previously applied to | o, been interviewed by, or | been employed b | y a Zehnder comp | any? 🗌 Yes | ☐ No | | |
| If yes, indicate dates and for w | hat position: | | | | | | |
| How were you referred to our o | company? | | | | | | |
| | | | | | | | |

Employment history



Start with the most recent position, include all prior employment using an additional sheet if necessary. Account for all gaps of unemployment.

| End date (MM/YY) | Starting position title Street address (city, state, zip code) Supervisor's title | Current/last position title Supervisor's phone numbe |
|------------------|---|---|
| | | Supervisor's phone numbe |
| | Supervisor's title | Supervisor's phone numbe |
| | Supervisor's title | Supervisor's phone numbe |
| | | |
| | | May we contact this employer? Yes No |
| | | |
| End date (MM/YY) | Starting position title | Current/last position title |
| | Street address (city, state, zip code) | |
| | | |
| | Supervisor's title | Supervisor's phone numbe |
| | | May we contact this employer? Yes No |
| End date (MM/YY) | Starting position title | Current/last position title |
| | Street address (city, state, zip code) | |
| | | |
| | Supervisor's title | Supervisor's phone numbe |
| | | May we contact this employer? |
| | End date (MM/YY) End date (MM/YY) | Street address (city, state, zip code) Supervisor's title End date (MM/YY) Starting position title Street address (city, state, zip code) |

Education



| Name and address | Last grade | Did you | Course of study/concentration | | |
|---|------------|-----------|-------------------------------|--|--|
| Name and address | completed | graduate? | (include details) | | |
| High school | 9 10 11 12 | Yes No | | | |
| College | 1 2 3 4 | Yes No | | | |
| | | | | | |
| Graduate and/or special schools, trade schools, vocational schools | 1 2 3 4 | Yes No | | | |
| If you did not graduate high school, did you receive a G.E.D.? | ☐ No |) | | | |
| If yes, date completed: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Other training/achievements | | | | | |
| Have you served in the United States military? | No | | | | |
| Branch of service: | | | | | |
| Description of duties: | | | | | |
| | | | | | |
| | | | | | |
| Description of education or training received in the military: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Special skills | | | | | |
| | | | | | |
| Machines operated, special courses, computers, typing, special licenses, permits, certificates, etc.: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

References Excluding relatives



| Name | Name |
|--------------|--------------|
| Company | Company |
| Title | Title |
| Address | Address |
| Phone Number | Phone Number |
| | |
| Name | Name |
| Company | Company |
| Title | Title |
| Address | Address |
| Phone Number | Phone Number |

Applicant acknowledgement

Accuracy of Information

I certify that the information contained in my application is complete and correct and understand that any falsification or misrepresentation of the information will disqualify me from consideration for employment or, if hired, may result in termination of employment.

References

I authorize Zehnder Rittling, and any independent agency acting on behalf of the company, to request and receive information from various parties to assist in verifying the accuracy of my application and in evaluating my candidacy for employment. I release the parties supplying such information as well as Zehnder Rittling, its owners, directors, affiliates, employees and agents, from any and all liability and responsibility arising out of the release and receipt of this information.

Substance Abuse Policy

I understand that if I am offered employment, I will be required to submit to a required drug/alcohol test at a company selected facility paid for by the company and that such offer of employment is contingent upon passing this test. I understand that the company maintains an alcohol-free and drug-free workplace and if hired I will be required to abide by the policy, including the possibility of additional and/or random testing.

Employment-at-Will

If I am hired, I understand and agree that my employment will be terminable at will; that is, either the company or I may terminate the employment relationship at any time for any reason or no reason, with or without notice. I understand that except for the company president, no company representative has the authority to alter this employment-at-will relationship and if hired I will not rely on any such promises, representations or agreements regarding continued employment unless made in writing by the company president.

| Name: Dat | ite: |
|-----------|------|
|-----------|------|