

# APPLICATION FOR EMPLOYMENT



**1940 Oakland Parkway  
Columbia, TN 38401  
(931) 388-6202  
<https://columbiamw.com>**





## Application for Employment

Position You Are Applying For: \_\_\_\_\_

Desired Salary: \_\_\_\_\_

Date Available for Work: \_\_\_\_\_

### PERSONAL INFORMATION

\_\_\_\_\_  
Last Name First Name Middle

\_\_\_\_\_  
Address City State Zip

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Are you a U.S. Citizen? ☐ Yes  
☐ No

Have you ever been convicted of a felony? ☐ Yes  
☐ No

Are you willing to submit to a pre-employment drug screening test? ☐ Yes ☐ No

### EDUCATION

School Name	Location	Years Attended	Degree Received	Major

Other training, certifications or licenses held:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EMPLOYMENT

Employer:	_____	Dates Employed	From _____
Work Phone:	_____	Pay Rate: \$ _____	To _____
Address: _____			
Position: _____			
Duties Performed: _____			
Supervisors Name and Title: _____			
Reason for leaving: _____			
May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employer:	_____	Dates Employed	From _____
Work Phone:	_____	Pay Rate: \$ _____	To _____
Address: _____			
Position: _____			
Duties Performed: _____			
Supervisors Name and Title: _____			
Reason for leaving: _____			
May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No			

## REFERENCES (List 3 Personal or Professional)

Name	Title	Company	Phone

## MILITARY SERVICE

**ARE YOU A VETERAN?** ☐ YES ☐ NO If YES please complete the following: Branch: \_\_\_\_\_

Rank at discharge: \_\_\_\_\_ Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Type of discharge: \_\_\_\_\_ If not honorable, please explain: \_\_\_\_\_

## BACKGROUND CHECK

**Have you ever been convicted of a crime, other than traffic offenses?** ☐ YES ☐ NO

If YES, state date convicted, offense convicted of, and circumstances \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## OTHER INFORMATION

Are you able to perform the essential functions of the job for which you are applying, with or without reasonable accommodation? ☐ YES ☐ NO

Have you ever been terminated from employment or asked to resign? ☐ YES ☐ NO

Can you work any shift? ☐ YES ☐ NO If no, explain:

Can you work overtime, including weekends? ☐ YES ☐ NO

How did you hear about us? ☐ WALK IN ☐ ADVERTISEMENT ☐ REFERRAL ☐ OTHER

Have you ever worked for this company before? ☐ YES ☐ NO

If yes please list dates of service and explain why you left CMW \_\_\_\_\_

Do you know anyone who currently works for our company? ☐ YES ☐ NO

If yes, who? \_\_\_\_\_

Are you a relative of anyone who currently works for CMW? ☐ YES ☐ NO

If yes, who/relationship? \_\_\_\_\_

### DISCLAIMER

Columbia Machine Works, Inc. provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.

I, the Applicant, understand that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, the application must be fully completed in order for it to be considered.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. I authorize investigation of all statements contained in this application. I authorize Columbia Machine Works, Inc. to contact references provided for employment reference checks. I understand that any false or misleading information in my application or interview or any misrepresentation or omission of facts in my application or interview, may be deemed sufficient cause for rejection of this application or result in my employment being terminated.

I, the Applicant, understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Columbia Machine Works, Inc. to hire me. If I am hired, I understand that either Columbia Machine Works, Inc. or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Columbia Machine Works, Inc. has the authority to make any assurance to the contrary.

I, the Applicant, authorize Columbia Machine Works, Inc. to contact references provided for employment reference checks. I hereby authorize the proper party (current or former employer, credit or investigative agency and/or personal acquaintance) to provide Columbia Machine Works, Inc. requested reference information and any other additional information which is felt would aid Columbia Machine Works, Inc. in reaching an employment decision. I will hold any person or company harmless who provides Columbia Machine Works, Inc. information concerning my employment record and/or character.

I, the Applicant, attest with my signature below that I have given to Columbia Machine Works, Inc. true and complete information on this application. No requested information has been concealed.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME \_\_\_\_\_