

# MAICO

Industries, INC.

## EMPLOYMENT APPLICATION FOR MAICO INDUSTRIES, INC.

We ask that you cooperate by carefully answering all questions. What we know about you will help us assist you in making progress within our organization, if you are employed. Print name in full, then complete remainder of application in longhand.

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_  
First Middle Last

Current Address: \_\_\_\_\_

List Former Residences in the last 5 years

|   |       |                                |       |
|---|-------|--------------------------------|-------|
| 1 | _____ | How long have you lived there? | _____ |
| 2 | _____ | How long have you lived there? | _____ |
| 3 | _____ | How long have you lived there? | _____ |
| 4 | _____ | How long have you lived there? | _____ |

(Street) (City) (State)

Residence Phone Number \_\_\_\_\_ Business Phone Number \_\_\_\_\_

Position Applying For \_\_\_\_\_ When available for work \_\_\_\_\_

Present Employment Status \_\_\_\_\_

Does your Present Employer know your planning to leave? \_\_\_\_\_

If employed, why do you want to leave your present employer? \_\_\_\_\_

What types of work do you enjoy doing most? \_\_\_\_\_

Why do you want to work for Maico Industries inc.? \_\_\_\_\_

Have you ever applied or been employed by us? \_\_\_\_\_ When? \_\_\_\_\_ Where \_\_\_\_\_

Who referred you to us for employment? \_\_\_\_\_

Are you over the age of 18? Yes \_\_\_\_\_ No \_\_\_\_\_ If No, Employment is subject to verification that you are minimum legal age.

Have you ever been convicted of any violation of the law? (Misdemeanors and/or Felonies)? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, give particulars \_\_\_\_\_

(Conviction is not an absolute bar to employment, but will be considered only in relation to specific job requirements.)

I have no objections, if it appears to be necessary, to having my name submitted to law enforcement authorities for checking. (Please Sign). \_\_\_\_\_

Do you have limitations that would prevent you from successfully performing the duties of the job for which you are applying with or without accommodation? \_\_\_\_\_

What rewards do you look for in a career? \_\_\_\_\_

What benefits do you look for when applying for a position? \_\_\_\_\_  
Why? \_\_\_\_\_

Names of Relatives employed by us: \_\_\_\_\_

MILITARY: Have you received notice to report for active duty? Yes \_\_\_\_\_ NO \_\_\_\_\_

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**EMPLOYMENT HISTORY:** Give your employment history as completely, and as accurately as possible beginning with the name of your present employer. List other employers and any periods of unemployment in the space provided.

|   |                    |                              |
|---|--------------------|------------------------------|
| 1. Firm Name:   | City/State         | Phone                        |
| Position:                      From:                      To: | Salary Starting:\$ | Ending:\$                    |
| Describe Duties:  |                    | Supervisor's Name and Title: |

Reason For Leaving:

|   |                    |                              |
|---|--------------------|------------------------------|
| 2. Firm Name:   | City/State         | Phone                        |
| Position:                      From:                      To: | Salary Starting:\$ | Ending:\$                    |
| Describe Duties:  |                    | Supervisor's Name and Title: |

Reason For Leaving:

|   |                    |                              |
|---|--------------------|------------------------------|
| 3. Firm Name:   | City/State         | Phone                        |
| Position:                      From:                      To: | Salary Starting:\$ | Ending:\$                    |
| Describe Duties:  |                    | Supervisor's Name and Title: |

Reason For Leaving:

|   |                    |                              |
|---|--------------------|------------------------------|
| 4. Firm Name:   | City/State         | Phone                        |
| Position:                      From:                      To: | Salary Starting:\$ | Ending:\$                    |
| Describe Duties:  |                    | Supervisor's Name and Title: |

Reason For Leaving:

|   |                    |                              |
|---|--------------------|------------------------------|
| 5. Firm Name:   | City/State         | Phone                        |
| Position:                      From:                      To: | Salary Starting:\$ | Ending:\$                    |
| Describe Duties:  |                    | Supervisor's Name and Title: |

Reason For Leaving:

| Dates of Unemployment Periods | Activities During Unemployment |
|-------------------------------|--------------------------------|
|                               |                                |
|                               |                                |

Indicate by Number  any of the above Employers you do not wish us to Contact

Were you ever Bonded?  On Which Jobs?  
 Are there any skills, qualifications or experiences which you feel would particularly fit you to work for this Company?  
 If so, why?

**EMPLOYMENT APPLICATION FOR MAICO INDUSTRIES, INC.**

**SELF-DESCRIPTION:** In the space provided below you are asked to describe yourself in your own words, without any attempt to be modest, just be objective. You need not to discuss your work background, since this has already been covered. Consider the answers to such question as: What is the most important thing in your life to do? How ambitious are you and for what? What is your main source of motivation? What are your interests? Upon what do you base decisions about what is moral or ethical. What are some of the words you have heard others who know you well enough use to describe you?

Lined writing area for the self-description question.

**What position of leadership have you held in school, work or elsewhere?**

Lined writing area for the leadership question.

**What would you like to be doing ten years from now so far as work is concerned?**

Lined writing area for the ten-year goal question.

**How do you plan to accomplish this?**

Lined writing area for the accomplishment plan question.

**What are your interests? Hobbies, Amusements, Leisure Activities, etc...**

Lined writing area for the interests question.

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## Education School

| Level of Education | Name and location of School | Type of Course | # of Years Attended | Did You Graduate | Degree Received |
|--------------------|-----------------------------|----------------|---------------------|------------------|-----------------|
| 1. Grade           |                             |                |                     |                  |                 |
| 2. High            |                             |                |                     |                  |                 |
| 3. College         |                             |                |                     |                  |                 |
| 4. Graduate        |                             |                |                     |                  |                 |
| 5. Other           |                             |                |                     |                  |                 |

Indicate any special interests and activities and organizations which you were active in while in school:

### REFERENCES: (List three (3) - (Do Not Include Relatives or Former Employers))

| NAME | ADDRESS | PHONE NUMBER | HOW LONG KNOWN |
|------|---------|--------------|----------------|
|      |         |              |                |
|      |         |              |                |
|      |         |              |                |

Maico Industries, Inc. is a "Drug Free Work Place." All entering employees must pass a urinalysis drug screen as a condition of employment

Are you opposed to random drug testing? \_\_\_\_\_ Do You Smoke? \_\_\_\_\_

Do you Currently use or abuse illegal and/or illicit drugs? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to submit to a physical examination upon an offer of employment? Yes \_\_\_\_\_ No \_\_\_\_\_

I hereby give my voluntary consent to be subjected to a physical examination upon an offer of employment, to determine if I have physical or mental limitations that would prevent me from performing the "essential functions" of this job assignment with or without accommodation. I understand that any physical examination given is solely for the benefit of the company and not the benefit of myself and that I will not be given information of any test results or opinions of any of the medical personnel. I also consent to a urinalysis drug screen upon offer of employment as a requirement of employment as prescribed by Maico Industries, Inc.'s Substance Abuse Policy. The results of the tests of my specimen will be released only to an authorized representative of Maico Industries, Inc. I also understand that failure to consent to a drug screen will be considered withdrawal from employment. I also understand that these exams are required of all entering employees and information gathered as a result of these exams will be treated as confidential medical records.

(Please Sign) \_\_\_\_\_

Any comments you would like to make:

### All Applicants Read the Following Statement Carefully and Sign Below.

I hereby certify that all information on this application and given in the interview process is true and authorize the company to contact my present and former employers, references, and all other sources listed in this application for verification. I further understand false, misleading, inaccurate statements or omissions may render this application void, and if employed, may be grounds for termination. Completion of this form does not assure me a position with nor obligate the company in any way. I further understand that employment with Maico Industries, Inc. is employment-at-will as provided by the statutes of the States of Kansas, and that the company reserves the unilateral right to modify its policies from time to time and to terminate my employment with the company at any time, for any reason. I further understand that this application will remain active for no longer than (6) six months from this date.

(Signature) \_\_\_\_\_ (Date) \_\_\_\_\_

As part of the application process, it is necessary for Maico Industries, Inc. to verify previous employment.

Please indicate below which previous employers you authorize to Maico Industries, Inc. to contact to verify employment history.

To proceed with such inquiry, we request that you sign an authorization for each previous employer listed above.

I understand that all employment inquiries are required of all entering employees and that information gathered as a result of said reports obtained will be treated as confidential personnel records.

(Please Sign) \_\_\_\_\_

Any comments you would like to make:

# EMPLOYMENT APPLICATION FOR MAICO INDUSTRIES, INC.

FOLLOWING QUESTIONS TO BE ANSWERED BY SHOP APPLICANTS ONLY

**Check Type of Machines/Equipment you have Operated**

**Length Of Experience**

- Overhead Crane
- Shear
- Band Saw
- Fork Lift
- Iron Workers
- CNC-Computer Numerical Control
- Other

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|   |     |    |
|---|-----|----|
| Will you work Saturdays and Overtime when Requested?                                      | Yes | No |
| Are you interested in working second shift if available?                                  | Yes | No |
| Are you able to lift a minimum of (50) fifty Pounds?                                      | Yes | No |
| Are you able to read a tape measure to 1/16 of an inch?                                   | Yes | No |
| Are you familiar with metric measurements/conversions?                                    | Yes | No |
| Are you able to read Blue Prints?   | Yes | No |
| Are you able to be at your work station each scheduled working day by your start-up time? | Yes | No |

**WELDERS:**

| Type of Weld:     | Yes | No | Training | Length of Experience |
|-------------------|-----|----|----------|----------------------|
| ARC               |     |    |          |                      |
| MIG-GAS METAL ARC |     |    |          |                      |
| MIG GAS CORED ARC |     |    |          |                      |
| OTHER             |     |    |          |                      |

**Please List any Fabrication shop Experience:**

| Company Name | Description of Experience | Length of Experience |
|--------------|---------------------------|----------------------|
|              |                           |                      |
|              |                           |                      |
|              |                           |                      |
|              |                           |                      |

**Applicant Should NOT Write Below This Line**

|  |              |              |              |              |
|--|--------------|--------------|--------------|--------------|
| Date Application Sent:                     | Reviewed By: |              |              |              |
| Date Application Received:                 |              |              |              |              |
| Disposition Recommended and Actions Taken: |              |              |              |              |
|  |              |              |              |              |
| Resume:                                    | Application  | Interview 1: | Interview 2: | Interview 3: |
| References                                 | Offer        | Accept:      | UA:          | Physical:    |

# EMPLOYMENT APPLICATION FOR MAICO INDUSTRIES, INC.

## FOLLOWING QUESTIONS TO BE ANSWERED BY SHOP APPLICANTS ONLY SER CORPORATION

### Referral and Release of Information

**Place a check in the following agricultural industries in which you or your spouse have worked with in the past two years:**

|                         |                                 |                      |                                  |                                       |                                  |             |
|-------------------------|---------------------------------|----------------------|----------------------------------|---------------------------------------|----------------------------------|-------------|
| <b>CASH CROPS</b>       | Wheat                           | Corn                 | Soybeans                         | Sunflower                             | Other _____                      |             |
| <b>FIELD CROPS</b>      | Cotton                          | Potato               | Alfalfa                          | Hay                                   | Other _____                      |             |
| <b>VEGETABLES</b>       | Tomato                          | Beans                | Lettuce                          | Watermelon                            | Cucumbers                        | Other _____ |
| <b>FRUITS AND NUTS</b>  | Grape<br>Pear                   | Citrus<br>Peach      | Apple<br>Walnut                  | Berry Farms<br>Pecan                  | Other _____                      |             |
| <b>NURSERIES</b>        | Bulb                            | Flower               | Green House                      | Bedding Plants                        | Other _____                      |             |
| <b>LIVESTOCK</b>        | Dairy<br>Turkey                 | Feedlot<br>Chicken   | Hogs<br>Eggs                     | Sheep and Goats<br>Poultry Hatcheries | Other _____<br>Other _____       |             |
| <b>CROP SERVICES</b>    | Plowing<br>Detasseling          | Hoeing<br>Fertilizer | Irrigation<br>Application        | Aerial Spraying<br>Weed Control       | Other _____<br>Thinning of Crops |             |
| <b>CROP HARVESTING</b>  | Hay Mowing                      |                      | Custom Harvesting                |                                       | Other _____                      |             |
| <b>CROP PREPARATION</b> | Pellet Mill<br>Grain Fumigation |                      | Grain Cleaning<br>Grain Elevator |                                       | Other _____<br>Grain Grinding    |             |

The SER Corporation is a not-for-profit organization that assists seasonal farm workers find full time employment through education and job training. If you qualify for our services, SER may be able to assist you in finding full time employment.

**\*\*\*If you checked any of the Lines above Please fill out the release form below. Thank You.**

If it has been over two years and you would like for SER to contact you to check other options through which you may still qualify, please write down the last date that you worked in agriculture and sign the release form below and someone will get in contact with you.

### Release Form

|             |              |
|-------------|--------------|
| Name:       | SSN:         |
| Address:    | Telephone #: |
| City/State: | Zip:         |

I authorize MAICO Industries, Inc. to release the information on this paper to SER Rural Initiative of Kansas and for SER to contact me for the purpose of training and employment assistance.

|                    |                            |
|--------------------|----------------------------|
| _____<br>Signature | Date _____<br>Today's date |
|--------------------|----------------------------|