



APPLICATION FOR EMPLOYMENT

(PLEASE PRINT)

Prospective associates will receive consideration without discrimination because of race, creed, color, sex, age or religion

PERSONAL DATA

Position(s) Applied For:		Pay Expected:	Date of Application:
How Did You Learn About Us?			
<input type="checkbox"/> Employment/Temporary Agency	<input type="checkbox"/> Newspaper Advertisement	<input type="checkbox"/> Friend Associate	<input type="checkbox"/> Walk-In Other
LAST NAME	FIRST NAME	MIDDLE NAME	
Street Address		Home Phone ()	
City, State, Zip Code		Business Phone ()	
Apart from absence for religious observance, are you available for work on any shift?		Will you work overtime if asked?	
<input type="checkbox"/> Yes <input type="checkbox"/> No If No, what hours can you work? _____		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you legally eligible for employment in the United States? (If hired, verification will be required per federal law.)		Date you will be available to start work	
<input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not? _____			

RECORD OF EDUCATION

Type of Institution	Name and Address of School	Course of Study	Circle Last Year Completed				Did you Graduate?	List Diploma Or Degree
			1	2	3	4		
High School	_____		1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University	_____		1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (Specify)	_____		1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

PERSONAL REFERENCES (Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number

Your application for employment will be considered active for a period of ninety days from the date above. After this time period, you must reapply for further consideration. Any questions regarding the position applied for at the time this application was submitted should be directed to The Human Resources Department, Cornwell Quality Tools Company, 200 North Cleveland Avenue, Mogadore, OH 44260-1205, (330) 336-3506 or 1-800-321-8356.

EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment history.

Name of Employer: _____ Address _____ City, State, Zip Code _____ Phone: (____) _____	Name of Last Supervisor	Employment Dates	Pay or Salary
		From: _____ To: _____	Start: _____ Final: _____
Your Last Job Title: _____			

Reason for Leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of Employer: _____ Address _____ City, State, Zip Code _____ Phone: (____) _____	Name of Last Supervisor	Employment Dates	Pay or Salary
		From: _____ To: _____	Start: _____ Final: _____
Your Last Job Title: _____			

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Your Last Job Title: _____			

Reason for Leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

**IF THE ABOVE DOES NOT INCLUDE ALL JOBS SINCE YOU STARTED WORKING,
PLEASE LIST OTHERS BELOW**

COMPANY	YOUR TITLE	Dates	
		From	To
<p><i>We may contact the employers you have listed unless you indicate those you do not want us to contact</i></p>		DO NOT CONTACT	
		Employer	Reason Not To Contact

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience. You may describe any specialized training, apprenticeship, skills and extra-curricular activities you feel may be helpful to us in considering your application.

INDICATE MONTHS OF EXPERIENCE IN ANY OF THE FOLLOWING

MACHINE SHOP	Centerless Grinder	MAINTENANCE	Stock Clerk
CNC Lathes	Punch Press	Electronics	Shipping/Receiving
Milling Machines	Saw/Chamfer	Hydraulics/Pneumatics	UPS/FedEx Shipping
CNC Machining Center	Plating/Black Oxide	Masonry	OFFICE RELATED
Drill Press	SPECIAL ABILITIES	Machine Repair	Cost Accounting
Hand Assembler	Blueprint Reading	Electrical	AP/AR
Hand Polisher	Micrometers	Painter	Operator/Receptionist
CNC Chucker	Calipers	Carpentry	Telemarketing
Tool & Cutter Grinder	Gages	WAREHOUSING	Customer Service
Screw Machine	Schematics	Forklift Truck	Secretarial/Clerical
Tool & Die Maker	Make Machine Set-Ups	Picking/Packing	Purchasing

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied?

(A Description of the activities involved in such a job or occupation has been provided.) YES NO

Educational Release Authorization (Complete After Job Offer)

<i>This Release Authorization must include all institutions which you have attended including High School.</i>	I hereby authorize the following institutions to release to Cornwell Quality Tools Company verification of my attendance and degree at:
School:	Graduation Date: <i>Dates Attended:</i>
Degree/Major:	I attended under the name of?
School:	Graduation Date: <i>Dates Attended:</i>
Degree/Major:	I attended under the name of?
Your Signature:	Date Signed:
Social Security Number:	

PLEASE READ CAREFULLY

I UNDERSTAND THAT:

- I authorize Cornwell Quality Tools Company to obtain verification of all statements made in this application and other job related information considered pertinent by the Company.
- Any misrepresentation by me in this application will be sufficient cause for termination from the Company.
- I understand that Cornwell Quality Tools Company is a **drug-free workplace** and I will comply with all aspects of the drug and alcohol testing procedures.
- My application for employment with Cornwell Quality Tools Company is made with the understanding that nothing contained in this application or in the granting of an interview is intended to create a contract between Cornwell Quality Tools Company and myself for either employment or for the providing of any benefit. Further, if Cornwell Quality Tools Company and I enter into an employment relationship, I understand that I have the right to terminate my employment at any time and for any reason and that Cornwell Quality Tools Company retains a similar right.

APPLICANT'S SIGNATURE	Date Signed:
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Please be sure to read the enclosure regarding "Employee Polygraph Protection,"
"Equal Employment Is The Law" and "E-Verify Notice."

*Thank you for completing this application form
and for your interest in Cornwell Quality Tools Company.*