



207 EAST LINCOLN AVENUE
MILWAUKEE WI. 53207

EMPLOYMENT APPLICATION

DATE: _____

NAME: _____
(FIRST, MIDDLE, LAST)

ADDRESS: _____
STREET CITY STATE ZIP

TELEPHONE: _(____)____ PRIMARY _(____)____ SECONDARY

ARE YOU AT LEAST 18 YEARS OLD? YES _____ NO _____

IF APPLYING FOR DRIVER'S POSITION, PLEASE INDICATE:

DRIVER'S LICENSE #: _____ TYPE OF LICENSE (ex. CDL, REGULAR): _____

EDUCATION

TYPE	NAME/LOCATION	YEARS COMPLETED	DIPLOMA/ DEGREE
HIGH SCHOOL			
COLLEGE			
OTHER			

EMPLOYMENT HISTORY

(PLEASE BEGIN WITH THE MOST RECENT EMPLOYER)

COMPANY/NAME Address	DATE/ START/LEFT	TYPE OF WORK	PAY	REASON FOR LEAVING	PHONE #

Klement Sausage Company is an Equal Employment / Affirmative Action Employer.

TYPE OF WORK DESIRED: _____ SALARY DESIRED: _____
SHIFT ABLE TO WORK: 1ST ____ 2ND ____ 3RD ____ ANY ____

HOW WERE YOU REFERRED TO OUR ORGANIZATION? _____
DO YOU HAVE RELATIVES EMPLOYED BY THIS ORGANIZATION? YES ____ NO ____
PLEASE SPECIFY: _____

IS THERE ANY INFORMATION WE WOULD NEED ABOUT YOUR NAME, OR USE OF ANOTHER NAME TO ENABLE US TO CHECK YOUR WORK RECORD? YES ____ NO ____
PLEASE SPECIFY: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES ____ NO ____
IF YES: PLEASE EXPLAIN WHEN AND WHY. _____

U.S. MILITARY SERVICE

BRANCH OF SERVICE: _____ FROM _____ TO _____
RANK & TYPE OF SERVICE: _____
TRAINING/EXPERIENCE RECEIVED: _____

**REFERENCES
(OTHER THAN RELATIVES)**

NAME	OCCUPATION	YEARS KNOWN	PHONE NUMBER

PLEASE LIST ANY ADDITIONAL INFORMATION THAT RELATES TO YOUR ABILITY TO PERFORM THE JOB FOR WHICH YOU HAVE APPLIED (LICENSE, PROFESSIONAL, MEMBERSHIP, HOBBIES, ETC.) _____

OFFERS OF EMPLOYMENT WILL BE MADE CONTINGENT ON PROVIDING THE NECESSARY DOCUMENTATION, ON FORM I-9 AS REQUIRED BY THE IMMIGRATION REFORM AND CONTROL ACT OF 1986. KLEMENT'S MAY UTILIZE E-VERIFY AS A SCREENING TOOL TO ENSURE WE HAVE A LEGAL WORKFORCE.

I CERTIFY THAT ALL THE STATEMENTS HERE ARE TRUE AND UNDERSTAND THAT ANY FALSIFICATION, INCOMPLETE INFORMATION OR OMISSIONS SHALL BE SUFFICIENT CAUSE FOR DISMISSAL IF EMPLOYED OR REJECTION OF MY APPLICATION IF NOT EMPLOYED.

YOUR SIGNATURE: _____ DATE: _____

REVISED 9/4/08