Application for Employment

(Last revision 10152025)

WINDEMULLER

INSTRUCTIONS

You must answer all questions accurately and completely. You must sign and date the application. Do not provide information not requested. Please carefully read all statements contained in the Certification at the end of the application and provide a signature where indicated. If you do not comply with these instructions, your application will be disregarded. The company will consider your application pursuant to its normal procedures for a period of 30 days.

Windemuller bases its hiring decisions on a variety of factors, including skills and ability to perform the job, prior employment with us, employment references as to character and willingness to work, willingness to accept the offered salary, and personal interviews. We do not discriminate on the basis of race, sex, color, religion, sex, national origin, age, disability, veteran status, or any other legally protected status.

PLEASE PRINT LEGIBLY

Name _____ Date of Application _____
Last First M.I.

Address _____
Street City State Zip

Telephone # _____ Alternate # _____

Email Address _____

Position(s) applied for _____

If you are under 18 years of age, can you provide required proof of your eligibility to work?..... ☐ Yes ☐ No

Have you been employed with us before? ☐ Yes ☐ No
(If yes, provide date) _____

Are you legally authorized to work in the United States?..... ☐ Yes ☐ No

Have you ever pleaded "guilty" or "no contest" to or been convicted of a crime?..... ☐ Yes ☐ No
(If yes, provide date(s) and details _____

_____

_____

Are there any felony charges pending against you now? Yes _____ No_____
If yes, describe _____

Have you ever been discharged or terminated from employment? ..... ☐ Yes ☐ No
If yes, please provide details _____

_____

_____

Are you currently on a "layoff" status and subject to recall?..... ☐ Yes ☐ No

Do you hold a valid driver's license?.... ☐ Yes ☐ No
License # _____
State Issued _____

What type of work are you applying for?
☐ Part-Time ☐ Full– Time

Are you willing to work overtime or shift work?..... ☐ Yes ☐ No

What date would you be available for work? _____

What is your desired salary range or hourly rate of pay?
$ _____ Per _____

If the job requires it, what percentage of time are you willing to travel? _____%

Referral Source (Check appropriate category and list source.)

☐Advertisement _____
☐Employee Referral _____
☐School _____
☐Job Fair _____
☐Agency _____
☐Other _____
☐Walk-in

Employment History

Starting with your most recent job, provide the following information. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer _____

Address _____

Telephone Number _____

Supervisor _____

May we contact for reference? ☐ Yes ☐ No

Job Title _____

Reason for Leaving _____

Type of work performed _____

Dates Employed: _____ (Month / Year) to _____ (Month / Year)

Compensation: (Starting)

☐ Hourly ☐ Salary $ _____ per _____

Commission/Bonus/Other Compensation

$ _____

Compensation: (Final)

☐ Hourly ☐ Salary $ _____ per _____

Commission/Bonus/Other Compensation

$ _____

Employer _____

Address _____

Telephone Number _____

Supervisor _____

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Job Title _____

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$ _____

Compensation: (Final)

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Dates Employed: _____ (Month / Year) to _____ (Month / Year)

Compensation: (Starting)

☐ Hourly ☐ Salary $ _____ per _____

Commission/Bonus/Other Compensation

$ _____

Compensation: (Final)

☐ Hourly ☐ Salary $ _____ per _____

Commission/Bonus/Other Compensation

$ _____

Employer _____

Address _____

Telephone Number _____

Supervisor _____

May we contact for reference? ☐ Yes ☐ No

Job Title _____

Reason for Leaving _____

Type of work performed _____

Dates Employed: _____ (Month / Year) to _____ (Month / Year)

Compensation: (Starting)

☐ Hourly ☐ Salary $ _____ per _____

Commission/Bonus/Other Compensation

$ _____

Compensation: (Final)

☐ Hourly ☐ Salary $ _____ per _____

Commission/Bonus/Other Compensation

$ _____

Educational Background

Starting with your most recent school attended, please provide the following information:

School (include City and State)	Course of Study Certification/License	Number of Years	Completed
			☐ Diploma ☐ GED ☐ Degree ☐ Certification/License/Other
			☐ Diploma ☐ GED ☐ Degree ☐ Certification/License/Other
			☐ Diploma ☐ GED ☐ Degree ☐ Certification/License/Other
			☐ Diploma ☐ GED ☐ Degree ☐ Certification/License/Other

Other Qualifications

Summarize any special training, skills, licenses and/or certificates from employment or other experience that may assist you in performing the position for which you are applying.
State any additional information you feel may be helpful to us in considering your application:

Note to Applicants:

1. Have you been provided a copy of the Job Description ☐ Yes ☐ No

Do not answer this question unless you have been informed about the requirements of the job for which you are applying.

2. Are you able to perform the "essential functions" of the job for which you are applying, with or without reasonable accommodation? ☐ Yes ☐ No

3. Are you currently subject to the terms of any non-compete, non-solicitation, and/or non-disclosure agreement with a current or prior employer or third party? Yes_____ No_____ If answered "yes", please describe the terms of any such agreement as well as the expiration date or provide a copy. The company reserves the right to inspect any such agreement (s) as a precondition to any offer of employment.

Professional References

List names and telephone numbers of three persons not related to you, whom you have worked for or with.

Name	Relationship to You	Telephone/Email	# Years Known

Applicant's Certification and Agreement (Please Read Carefully):

1. Certification of Truthfulness. I certify that all statements on this Application for Employment are complete and truthful and agree that such statements may be investigated and if found to be false will be sufficient reason for not being employed, or if employed may result in my dismissal.

2. Proof of License, Registration and/or Certification. If I am applying for a position that requires a license, registration and/or certification, I understand that any offer of employment made by the Company is expressly conditioned upon my providing proof satisfactory to the Company that I have a current license, registration and/or certification of the kind required and the Company's further verification of this information. I understand that if the Company is not able to verify my license, registration and/or certification to its satisfaction, the Company may rescind any job offer or terminate my employment.

3. Authorization for Employment/Educational Information. I authorize the references listed in this Application for Employment, and any prior employer, educational institution, or any other persons or organizations to give the Company any and all information concerning my previous employment/educational accomplishments, disciplinary information or any other pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I hereby waive written notice that employment information is being provided by any person or organization.

4. Employment at Will. If I am hired, in consideration of my employment, I agree to abide by the rules and policies of the Company, including any changes made from time to time, and agree that my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either the Company or myself. I understand that no manager or other representative of the Company, other than the President, has any authority to enter into any agreement for employment for any specific or indefinite period of time, or to make any agreement contrary to the foregoing. Any such agreement made by the President must be made in writing to be effective.

5. Authorization to Work. If I am selected for hire, I will be offered employment provided I verify that I am authorized to work as required by the Immigration Reform and Control Act of 1986.

6. Limitation on Claims. I agree that any lawsuit or claim against the Company arising out of my employment or termination of employment (including, but not limited to, claims arising under state, federal or local civil rights laws) must be brought within the following time limits or be forever barred: (a) for lawsuits requiring a Notice of Right to Sue from the EEOC, within 90 days after the EEOC issues that Notice; or (b) for all other lawsuits, within (i) 180 days of the event(s) giving rise to the claim, or (ii) the time limit specified by statute, whichever is shorter. I waive any statute of limitations that exceeds this time limit.

7. Need for Accommodation. If I have a mental or physical disability and require an accommodation to perform the job, I must notify the Company of that need in writing within 182 days after I knew or reasonably should have known that an accommodation was needed. Failure to do so will bar me from alleging that the Company has not accommodated me as required by law.

8. Offer of Employment Conditioned on Outcome of Investigation. I understand that any offer of employment made by the Company is also expressly conditioned upon the Company's investigation of my background in order to verify information contained in this application, including but not limited to, obtaining information from any former employers, schools and law enforcement agencies. I further understand that if the Company is not able to verify information contained in this application to its satisfaction, or if the Company obtains information that leads it to conclude, in its discretion, that I should not be employed, the Company may rescind any job offer or terminate my employment.

9. Criminal Records Check. I authorize the Company to secure my criminal conviction history. I agree to execute the appropriate authorization if necessary to obtain such information.

10. Driving Record Check. I agree to execute an authorization for this employer to inquire into, and obtain documents related to, any driving record from every state in which I have held a motor vehicle operator's license or permit.

11. Release of Medical Information. I authorize every medical doctor, physician or other health care provider to provide any and all information, including but not limited to, all medical reports, laboratory reports, X-rays or clinical abstracts relating to my previous health history or employment in connection with any examination, consultation, test or evaluation. I hereby release every medical doctor, health care personnel and every other person, firm, officer, corporation, association, organization or institution which shall comply with the authorization or request made in this respect from any and all liability. I understand that this release will not be sent to my physician or other health care provider until a conditional job offer has been made.

12. Physical Exam and Drug and Alcohol Testing. I agree to take a physical exam following a conditional job offer. I also authorize the Company or its designated agent(s) to withdraw specimen(s) of my blood, urine, hair and/or other substances for chemical analysis. One purpose of this analysis is to determine or exclude the presence of alcohol, drugs or other substances. I understand that decisions concerning my employment may be made as a result of these tests.

13. Consideration for Employment. I understand that my application will be considered pursuant to the Company's normal procedures for a period of thirty (30) days. If I am still interested in employment thereafter, I must reapply. I agree that if any of the above commitments is ever found to be legally unenforceable as written, the particular commitment concerned shall be limited to allow its enforcement as far as legally possible.

I have read, understand, and agree to items 1 through 13 above. I knowingly and voluntarily acknowledge that with my signature below.

_____ _____

Signature of Applicant **Date**