

APPLICATION FOR EMPLOYMENT

Qualified applicants are considered for all positions without discrimination based upon race, color, age, religion, sex, national origin, marital status or disability. Michigan Seamless Tube, LLC is an Equal Opportunity Employer. Please answer all questions completely and accurately. Incomplete applications may be rejected.

PLEASE PRINT

PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE INITIAL	SOCIAL SECURITY NUMBER
PRESENT STREET ADDRESS			()
CITY, STATE, ZIP CODE			HOME TELEPHONE
			()
			BUSINESS TELEPHONE

If you have lived at the above address for less than six (6) months, list your previous address: _____

Are you over 18? Yes No

Have you previously applied for a position with Michigan Seamless Tube, LLC.? Yes No

If yes, when and what position? _____

Are you legally eligible for employment in the United States? Yes No

Are you related to anyone currently working at Michigan Seamless Tube, LLC.? Yes No

If yes, please list name and relationship: _____

Have you ever worked under a different last name than currently used? Yes No

If yes, please state name: _____

Are you able to perform all of the essential duties of the job for which you are applying? Yes No

If no, please explain: _____

Have you ever been convicted of a crime* or plead nolo contendere plea or "no contest"? Yes No

If yes, indicate date(s) of conviction(s) and type(s) of offense(s): _____

Falsification, misrepresentation and/or omission of criminal conviction are grounds for refusal to hire or, if hired, for dismissal.

*** NOTE: A conviction does not automatically disqualify an applicant from employment.**

JOB REQUIREMENTS

Position applied for: _____

Referral source: _____

Were you referred by a current employee? Yes No

If yes, state name _____

Available date to begin work _____

How many hours per week do you prefer? _____

Are there any limitations on your working hours? Yes No

If yes, please explain: _____

Salary requirements _____

Are you seeking full-time or part-time employment? Full-time Part-time

If part-time, what hours are you willing to work? _____

EDUCATION

SCHOOL OR COLLEGE	NAME & LOCATION	NUMBER OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE / DIPLOMA
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade School			<input type="checkbox"/> Yes <input type="checkbox"/> No	

List scholastic achievements, organizations and internships: _____

Membership in professional or civic organizations (exclude those which may disclose race, color, religion or national origin): _____

MILITARY SERVICE

Include U.S. military active duty and reserve duty.

From: _____ To: _____

Branch of service: _____ Rank: _____

Please list military occupational skills: _____

RELEVANT SKILLS

Please list computer software programs you have used and your level of proficiency (low, intermediate, high).	
Please list any office machines or equipment of which you are an experienced operator.	
Please list any plant machines or equipment of which you are an experienced operator.	
Please list any foreign language skills you have and your level of proficiency in speaking and writing that language (low, intermediate, high).	

EMPLOYMENT

In applying here for employment, it is understood that we reserve the privilege of contacting past employers regarding references.

Are you employed now? Yes No

May we contact your present employer? Yes No

Have you ever been suspended or placed on probation for performance on your job? Yes No

If yes, please explain: _____

Do you have any part- or full-time jobs that you would expect to continue during your employment here? .. Yes No

If yes, please describe: _____

Please disclose any other current employment, business or company in which you are involved or have an interest:

Please list all jobs over the past ten (10) years, beginning with your present or most recent position. Include all self-employment, summer and part-time jobs.

Company name:	Telephone (include area code):
Address:	Employed (month and year): From: _____ To: _____
Supervisor:	Compensation: Start: _____ Last: _____
Job Title:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Describe your work:	Reason for leaving:
Company name:	Telephone (include area code):
Address:	Employed (month and year): From: _____ To: _____
Supervisor:	Compensation: Start: _____ Last: _____
Job Title:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Describe your work:	Reason for leaving:
Company name:	Telephone (include area code):
Address:	Employed (month and year): From: _____ To: _____
Supervisor:	Compensation: Start: _____ Last: _____
Job Title:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Describe your work:	Reason for leaving:

Company name:	Telephone (include area code):
Address:	Employed (month and year): From: _____ To: _____
Supervisor:	Compensation: Start: _____ Last: _____
Job Title:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Describe your work:	Reason for leaving:
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Supervisor:	Compensation: Start: _____ Last: _____
Job Title:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Describe your work:	Reason for leaving:

If you need additional space, please attach a separate sheet of paper. In addition, if you have a resume, please provide a copy with this application.

CERTIFICATION

Please read carefully. If you have any questions regarding this statement, please discuss them with a Human Resource Representative before signing.

"I certify that the information contained in this application, and accompanying resume, if any, is true and complete to the best of my knowledge and understand that falsification, misrepresentation and/or omission of information is grounds for refusal to hire or, if hired, dismissal. I authorize any persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, local records check and/or any other information that they may have, with regard to any of the subjects covered by this application and release all such parties from all liability for any damage that may result from furnishing such information to you."

_____ **Initials**

"In the event of my employment, I agree to conform to the rules, regulations and benefits of Michigan Seamless Tube, LLC. and acknowledge that these rules, regulations and benefits may be changed, interpreted, withdrawn, or added to by Michigan Seamless Tube, LLC. at any time, at Michigan Seamless Tube, LLC. sole option and without prior notice to me. _____ **Initials**

I understand that this employment application and any other Michigan Seamless Tube, LLC. documents are not contracts for employment, and that my employment and compensation will be employment at will and can be terminated at any time, with or without cause and with or without notice, at the option of either Michigan Seamless Tube, LLC. or myself." _____ **Initials**

"I understand that Michigan Seamless Tube, LLC. may require me to undergo a pre-placement physical and drug screen test by medical staff and/or agent selected by Michigan Seamless Tube, LLC. as a condition of my employment and/or continued employment. I further understand that I must successfully pass the drug test to be considered for employment at Michigan Seamless Tube, LLC. I understand that medical examinations and drug screens (random, lost time accidents, and just cause) which are job-related and consistent with Michigan Seamless Tube, LLC. business necessity may be required of me once I am employed. I further release Michigan Seamless Tube, LLC., including all of its officers, agents, representatives and employees from any and all claims, suits, causes of action, liability and damages associated with or arising from my submission to a drug test and/or medical examination. I also understand that Michigan Seamless Tube, LLC., does maintain a restricted smoking environment. _____ **Initials**

"I understand that Michigan Seamless Tube, LLC. prohibits illegal or inappropriate harassment. I understand that if employed, I can report any instance of illegal or inappropriate harassment to my supervisor or Company management with whom I work. _____ **Initials**

APPLICANT'S SIGNATURE

DATE

Michigan Seamless Tube, LLC.
Equal Opportunity Employer
M/F/H/V