

provided by federal, state, and local laws.

## **Application For Employment**

## Weber Industries, Inc.

8417 New Hampshire Ave. / St Louis, MO 63123 Phone (314) 631-9200 / Fax (314) 631-1804

Applicant Information			
Date:	Social Security No:		
Name:	First	Middle	
Have you ever used any other names in the past	t? ☐ Yes ☐ No If Yes, please list all c	other names that you have	e used and the
dates during which you used these names:			
Current Address:			
Street	City	State	Zip
Telephone:		Other	
	Job Description		
Are you currently employed? ☐ Yes ☐ No	If Yes, may we contact your current emplo	oyer? 🗌 Yes 🔲 No	
Date you can begin work:	Position sought:		
Wage Rate or Salary Desired \$	Type of employment desired:	Full-Time  Part-Time	Temporary
Please answer the following questions only if	f you are applying for a specific job and	have read the job desc	ription for that job:
Can you do the activities involved in the job or o ☐ Yes ☐ No	ccupation for which you applied either with	n or without reasonable a	ccommodations?
Are you capable of moderately physically dema pulling or materials that can weigh up to 50 pour		ination of lifting, carrying,	pushing and/or
☐ Yes ☐ No			
Weber Industries, Inc. offers equal employment employment opportunities on the basis of race.			

	Tob Bescription Continued			
I certify that I an ☐ Yes ☐ No	n a U.S. citizen, permanent resident, or a foreign national with authoriza	ation to work in th	ne U.S.	
Have you ever bother than a par ☐ Yes ☐ No	peen convicted of, or entered a plea of guilty, no contest, or had a wither king ticket?	eld judgement to	a felony, misder	neanor, or
If yes, please ex	xplain:			
occurred, and of	viction does not mean that you will not be hired. The nature and circum ther factors, including the relevancy of the conviction to the position to a naideration. Thus, please provide a complete response to these question	which you are ap	plying, are all im	nportant in the
	Education			
	Name and Location of School	Years Completed	Degree In	Type of Degree
High School / GED				
College				
Technical or Other Training				
Wemberships in	Professional Organizations:			

(You may exclude listing any organizations which you believe by their name or character may reveal your race, religion, citizenship, national origin, age, marital status, disability or union affiliation).

Driving History				
Do you have a driver's license?				
Drivers License Number: State of Issuance: Expiration Date:				
Type:   Operator,   Commercial (CDL),   Chauffeur				
Have you had any accidents during the past three years? ☐ Yes, ☐ No If Yes, how many?				
Have you had any moving violations during the past three years? ☐ Yes, ☐ No If Yes, how many?				
Skills				
Please use this space to elaborate on any background, experience, or qualifications that you believe should be considered in evaluating your qualifications for employment. You may include hobbies, volunteer experience, and other activities you believe relevant. Please omit any information that would disclose your race, gender, age, marital status, ethnic origin, religious or political affiliations, or disability.				
Employment History				
Have you been employed with <i>Weber Industries, Inc.</i> previously?  Yes, No If yes, please state the dates of your				
employment: Position:				
Reason for leaving:  List two previous employers for whom you have worked. Listing the last employer first. Please explain any lapses between times when				

List two previous employers for whom you have worked, listing the last employer first. Please explain any lapses between times when employed. (Please provide the same information about any other employments that you have had on additional sheets of paper and attach them to your application form). List employers on next page.

Employer 1				
Company Name:				
Address:				
Phone:			From:	To:
If still employed, wha	at is the reason y	ou want	to leave:	
Starting Pay Rate: \$	☐ Hourly ☐ Weekly		ns held, primary duties in each, and effective o	dates:
	☐ Monthly ☐ Yearly			
Ending Pay Rate: \$	☐ Hourly ☐ Weekly			
	☐ Monthly ☐ Yearly			
Immediate Supervis	or at time of term	nination:		
Reason for Leaving:	Quit Co	mpany (	Closed Explain:	
			Employer 2	
Company Name:				
Address:				
Phone:			From:	То:
If still employed, what is the reason you want to leave:				
Starting Pay Rate: \$	Rate: Hourly  Weekly Positions held, primary duties in each, and effective dates:			
	☐ Monthly ☐ Yearly			
Ending Pay Rate: \$	☐ Hourly ☐ Weekly			
	☐ Monthly ☐ Yearly			
Immediate Supervise		ination.		
Reason for Leaving:  Layoff Fired Quit Company Closed Explain:				
		-		

	References:		
Name	Address	Relationship to Applicant	
Phone:			
Name	Address	Relationship to Applicant	
Phone:			
	D: 1: 10: 1		
	Disclaimer and Signature:		

Since employment at this Company is based upon mutual agreement, either the employee or Weber Industries, Inc. may terminate employment at any time and for any reason. In consideration of my employment, I accept the rules and regulations of the Company and will obey them. I further acknowledge the Company's right to change either my job assignment or my hours of work, or both. I understand that no supervisor, officer, agent, or representative of Weber Industries, Inc. other than its President, has any authority to enter into any agreement for employment for any period of time, or to make any agreement contrary to the foregoing.

In addition, I understand and agree that this application shall be valid for a period of thirty (30) days. If I wish to be considered after thirty (30) days, I recognize that I must complete a new application for employment.

I grant permission to the Company to investigate my personal, educational, and work histories thoroughly. In addition, I authorize the Company to confirm all information that I have given in connection with my application for employment. I, furthermore, release the Company and its agents from liability for any acts or omissions occurring during either such investigation or confirmation, or both. I further release any one or more individuals, organizations and their agents, educational institutions that I attended and their agents, or my former employers and their agents from any liability for any acts or omissions occurring in its or their responses to the Company's inquiries about me. This release specifically covers the employers and their agents and the educational institutions and their agents that I have identified in my responses to the inquiries made on this application form. I understand and agree that the Company may deny my application for employment or if it has already employed me that the Company may terminate my employment because of information obtained during the Company's investigation or confirmation, or both, of my responses made on my employment application. Upon the termination of my employment with the Company, regardless of when, how, or why my employment ends, and regardless of whether the Company or I terminate my employment, I authorize the Company to release information about my employment history with the Company and release the Company and all it's agents from any liability for the disclosure of information about my employment history to either governmental agencies or employers to whom I have applied for a job.

## **Certification and Authorization:**

I certify that I have given true and complete information in response to each category of information requested. I have also read,
understood, and accepted the conditions of employment stated in this application. I further authorize the release of information as
stated above. I recognize the Company's right either to revoke any employment offer or to terminate my employment if it ever finds
any of my responses written on this application either to falsify or to omit, or both, any information.

Name:	Date:	