

APPLICANT INFORMATION					
Last Name		First Name		M.I.	Date
Address		Unit #	City	State	Zip
Phone Number			Email Address		
Are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/>		
			If yes, Dates _____		
How did you hear about us?					
<input type="checkbox"/> Online Posting <input type="checkbox"/> Sign/ Banner <input type="checkbox"/> Job Fair <input type="checkbox"/> Print Ad (<input type="checkbox"/> Referral _____)					

POSITION		
Position Applied For	Available Start Date	Desired Pay

SHIFT AVAILABILITY ✓ <i>Your open availability</i>							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 st Shift	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 nd Shift	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 rd Shift	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EDUCATION	
High School	Address
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College	Address
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other	Address
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES			
Name	Title	Company	Phone

MILITARY SERVICE			
Branch	Rank at Discharge	From	To

EMPLOYMENT HISTORY *(Most recent first)*

Company		Job Title	
Address	Phone	Supervisor	
Responsibilities			
From	To	Reason for Leaving	
May we contact this employer for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Job Title	
Address	Phone	Supervisor	
Responsibilities			
From	To	Reason for Leaving	
May we contact this employer for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Job Title	
Address	Phone	Supervisor	
Responsibilities			
From	To	Reason for Leaving	
May we contact this employer for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

ADDITIONAL SKILLS AND QUALIFICATIONS

DISCLAIMER AND SIGNATURE
PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information I have provided in this application is true and complete to the best of my knowledge, and that no attempt has been made to conceal pertinent facts. I understand that all information I provided is open to investigation by Weber and that, if any such information is found to be false or misleading, this will be grounds for rejection of my employment application, or immediate dismissal if discovered at any time following employment.

I understand that any offer of employment extended as a result of this employment application is contingent upon successful completion of Weber's employment screening process which may include pre-placement physical evaluation, drug screening, background and reference checks. I further understand that if I am employed by Weber, I will be required to provide documentation verifying my identity and eligibility to work in the United States within three days following the commencement of my employment in accordance with the provisions of the Immigration Reform and Control Act of 1986.

I understand that this employment application and any other documents, including policies, guidelines, procedures, benefits, handbooks and manuals, are not intended to create any contractual obligation which in any way conflicts with Weber's policy that the employment relationship between the Company and each employee is at-will. Weber makes no representation that employment with the Company represents lifetime security or a guarantee of continued employment. An individual's employment may be discontinued with or without cause, at Weber's option when, in its sole judgment, it deems it to be in its best interest, or at the option of the employee. I further understand that any oral or written statements to the contrary are expressly disavowed and should not be relied upon.

Weber reserves the right to make changes to its policies, practices, guidelines, handbooks, manuals, benefits, or staffing levels at its discretion.

I understand that this application is valid for 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to complete a new application.

Applicant Signature	Date
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