

Morton Manufacturing

201. E Ave K-15 Lancaster, CA 93535

Employment Application

Morton Manufacturing is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, national origin, religion, age, sex, physical or mental disability, marital status, veteran status, or any other reason protected under applicable federal, state or local law. Morton Manufacturing is an At-Will employer meaning that either the Company or an employee may terminate the employment relationship at any time and for any reason, with or without advance notice.

Today's Date:

PERSONAL INFORMATION:

Last Name:		First Name:		M.I.:	Home phone:		Cell phone:		
Street Address:				City:		ZIP:	E-mail Address:		
Are you lawfully authorized to work in the United States?			<input type="radio"/> yes <input type="radio"/> no		How did you hear of Morton Manufacturing?				
Can you read, write, speak, and comprehend English?			<input type="radio"/> yes <input type="radio"/> no		Do you have a reliable means of transportation, to and from work? <input type="radio"/> YES <input type="radio"/> NO				
Did you graduate high school?			<input type="radio"/> yes <input type="radio"/> no						
				Any other education or training?					
Will you work overtime and Saturdays?			<input type="radio"/> yes <input type="radio"/> no		If no, give reasons:				
Will you work the night shift?			<input type="radio"/> yes <input type="radio"/> no						
Can you perform Essential Job Functions listed in Applicant Information with or without reasonable accommodation?					<input type="radio"/> yes <input type="radio"/> no		Do you require reasonable accommodation?		<input type="radio"/> yes <input type="radio"/> no

EMPLOYMENT: (List most recent job first)

Company:		City:		Job Duties:	
Date Started:	Date Left:	Reason for leaving:			
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Date Started:	Date Left:	Reason for leaving:			

I certify that the information provided in this Employment Application, and any other document provided in an effort to gain employment is true, correct, and complete. I also authorize investigation of all statements contained in these documents for employment, as it may be necessary, in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature: _____