

EMPLOYMENT APPLICATION

Piconics, Inc. • 26 Cummings Road • Tyngsboro, MA 01879-1406
 Telephone (978) 649-7501 • Fax (978) 649-9643

Piconics, Inc. is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

PERSONAL			
Last Name	First	Initial	E-Mail Address
Address:		Home Telephone Number ()	
City	State	Zip Code	Cell Phone Number ()
Position Desired	Referred By		Salary Requirement
Have you ever interviewed with Piconics before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list date(s), job title(s) & location(s)	
Have you ever been employed by Piconics before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list date(s), job title(s) & location(s)	
Do you have any relatives employed at Piconics? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, name, job title(s) & location(s)	
Are you a U. S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, do you have a work permit?) <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have Military Experience? <input type="checkbox"/> Yes <input type="checkbox"/> No Rank? _____ Honorable Discharge _____	

EDUCATION & ACHIEVEMENTS					
Circle Highest Grade Completed:					
High School		9	10	11	12
College, Trade or Business		1	2	3	4
Education (Name of School & Location)	Dates Attended (From / To)	Major & Minor	Degree, Diploma, License or Certificate		
High School:					
College/University:					
Continuing Education, Vocational, Business, Other:					
Honors, including societies & scholarships:		Professional & Technical Associations:			
Publications or Research:		Patents:			
Hobbies:		Other:			

GENERAL
As a condition of employment, will you take a physical or be tested for drugs? <input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No • If under 18, do you have a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No

REFERENCES

List three references (excluding relatives) that have personal knowledge of your training, experience, and capabilities.

Name	Title/Position	Company or College	Address	Telephone

EMPLOYMENT HISTORY

List all employments for the past 10 years, starting with the most recent position. All information **must** be completed. You may attach a resume, but not in place of completing the required information.

Employed From: / /	Employer Name:	Supervisor Name: May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employed Until: / /	Employer Address:	Supervisor Phone #:
Job Title:	Reason for Leaving:	
Duties & Responsibilities:		

Employed From: / /	Employer Name:	Supervisor Name:
Employed Until: / /	Employer Address:	Supervisor Phone #: May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title:	Reason for Leaving:	
Duties & Responsibilities:		

Employed From: / /	Employer Name:	Supervisor Name:
Employed Until: / /	Employer Address:	Supervisor Phone #: May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title:	Reason for Leaving:	
Duties & Responsibilities:		

CERTIFICATION & AUTHORIZATION

The above information is true and correct. I understand that, in the event of my employment by the Company, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

Applicant Signature

Date