



APPLICATION FOR EMPLOYMENT

Maxair, Incorporated is an Equal Opportunity Employer and selects the best matched individual for each position based on job-related criteria and without regard to race, color, sex, national origin, age, disability, veteran status, or any other protected status as defined in local, state, or federal fair employment guidelines. Statements made by applicants are subject to careful review for accuracy. Any misrepresentation or omissions will result in disqualification from further consideration for employment, or discharge from employment if discovered after the individual's hire date. This application will remain in an active file for thirty (30) days. If consideration after that time is expected, the applicant must reapply in person.

PERSONAL INFORMATION:

NAME LAST FIRST MIDDLE INITIAL

ADDRESS

TELEPHONE () - SOCIAL SECURITY # - -

POSITION YOU ARE APPLYING FOR:

OTHER POSITIONS YOU WOULD CONSIDER:

PLEASE CIRCLE YOUR RESPONSES

- Are you 18 years of age, or older? YES NO
Are you a citizen of the United States of America? YES NO
Have you applied to work here previously? YES NO
Have you worked at Maxair Inc. before? YES NO
Have you ever been terminated from employment? YES NO
May we contact your current employer for information? YES NO
The type of employment you are seeking: FULL TIME PART TIME TEMPORARY
Will you provide proof of your legal work status when requested? YES NO
Have you ever been convicted of a serious crime? YES NO

What days and hours can you work? ANYTIME SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY

Hours available:

When are you available to begin?

EDUCATION

What was the highest grade you completed? (Include college and related technical training.)

Name of the last school you attended:

Degree or certification earned:

EMPLOYMENT HISTORY
(Please, begin with the most recent.)

EMPLOYER: _____ ADDRESS: _____ SUPERVISOR: _____ PHONE: () _____ - _____ YOUR POSITION/DUTIES: _____ _____ REASON FOR LEAVING: _____ DATE HIRED: _____ DATE TERMINATED: _____ INITIAL RATE OF PAY: _____ FINAL RATE OF PAY: _____

EMPLOYER: _____ ADDRESS: _____ SUPERVISOR: _____ PHONE: () _____ - _____ YOUR POSITION/DUTIES: _____ _____ REASON FOR LEAVING: _____ DATE HIRED: _____ DATE TERMINATED: _____ INITIAL RATE OF PAY: _____ FINAL RATE OF PAY: _____

EMPLOYER: _____ ADDRESS: _____ SUPERVISOR: _____ PHONE: () _____ - _____ YOUR POSITION/DUTIES: _____ _____ REASON FOR LEAVING: _____ DATE HIRED: _____ DATE TERMINATED: _____ INITIAL RATE OF PAY: _____ FINAL RATE OF PAY: _____

APPLICANT'S CERTIFICATION

I certify and affirm that the information provided by me on this application, during interviews, and all other related documents and conversations, to be true in all respects. I further understand that any misrepresentation or omission will be grounds for immediate termination from further consideration or possible employment. I hereby authorize Maxair Inc. to fully investigate my suitability for employment by verifying and pursuing any source of information which Maxair Inc. deems to be related to my possible employment. This investigation may include, but is not limited to, law enforcement agency records, driving records, education and certification records, past employers, and related references. I release all parties contacted by Maxair Inc. and their agents from any and all liability and damages for providing such information. I understand that the employment relationship may only begin and continue with the mutual consent of Maxair Inc. and myself. I further agree to submit, as requested, to a physical examination and body fluids analysis any time requested after an offer of employment has been made. This test and/or analysis will be paid for by Maxair Inc., and the results will be retained in a confidential file.

Signature of Applicant Date

Return to: Maxair Inc., W6381 Columbia Drive, Appleton, WI 54914-9167
or email to patr@maxair-inc.com
Phone: (920) 738-3020 Fax: (920) 738-3026