## **APPLICATION FOR EMPLOYMENT**

Our Company is an Equal Opportunity Employer that employs in compliance with all applicable laws. We do not discriminate because of sex, age, race, color, religion, marital status, gender identity, national origin, disability, veteran status, or any other characteristic protected under local, state or federal law.

Name		Date
Name		
City	State	Zip
Telephone	E-mail Address	
<b>Employment Desired</b>		
Position for which you are applying:		
☐ Full-Time ☐ Part-Time ☐ Seasonal		
Which Kuiken Brothers Location are you app ☐ Fair Lawn, NJ ☐ Emerson, NJ ☐ Gar ☐ Roseland, NJ ☐ Succasunna, NJ ☐ Wa	field, NJ 🔲 Midland Park, N	
Date of Availability		
What source or referral led you to submit an	application with us?	
Do you have any relatives who work for Kuik	en Brothers Company, Inc	:?
Is there any reason you might be unable to papplied? ☐ Yes ☐ No	perform the function of th	e job for which you have

## **Education**

Schools	Name/Location	Circle Last Yr. Completed	Major Courses	Diploma/Degree
High School		7 8 9 10 11 12		
College		1 2 3 4 more		
Business or Trade		Months Attended		

Record of Military Service
Were you in the U.S. Armed Forces? 🔲 Yes 🚨 No
If yes, what branch?
Dates of Duty: From To
Rank at Discharge
List any special training you received:
Personal Information
Are you legally authorized to work in the US?   Yes  No
Are you at least 18 years of age?   Yes  No
Have you ever applied for employment at Kuiken Brothers Company? 🔲 Yes 🚨 No
If yes, when?
Were you previously employed at Kuiken Brothers Company?   Yes  No
If yes, when?
Do you have any other experience, skills or qualifications you wish to mention?

## **Employment History**

Please list your <u>complete</u> employment history. List present or most recent employer first. Use an additional page, if necessary.

Employer	Employed (mo./Yr.)	Type of work performed	Reason for leaving
	From:		
	To:		
Address/City/State/Pho	one Number		
Name of Supervisor			
Employer	Employed (mo./Yr.)	Type of work performed	Reason for leaving
	From:		
	То:		
Address/City/State/Pho	one Number		
Name of Supervisor			
Employer	Employed (mo./Yr.)	Type of work performed	Reason for leaving
	From:		
	То:		
Address/City/State/Pho	one Number		
Name of Supervisor			
May we contact your	current employer a	t this time? 🔲 Yes 🔲 No	

I certify that the answers given by me to the foregoing questions and statements are true and correct to the best of my knowledge without consequential omissions of any kind.

I agree that the Company shall not be held liable in any respect if my employment is rejected or subsequently terminated because of false statements, answers or omissions made by me in this application. I understand that any misleading or incorrect statements may render this application void, and if employed, may lead to employment termination.

I understand that a medical examination based on the requirements of the position for which I am being considered may be required, and drug testing may be included as part of the regular pre-employment physical, and post-employment for safety sensitive positions. I also voluntarily and knowingly authorize the companies, schools or persons named above to give any information requested regarding my former employment, character and qualifications. I hereby voluntarily and knowingly fully release and discharge, absolve, indemnify, and hold harmless said companies, schools or persons from any and all liability for any damages for issuing this information, except for the malicious and willful disclosure of derogatory facts concerning my employment made for the express purpose of preventing me from obtaining employment, which the party disclosing such facts knows to be untrue.

In consideration of my employment, I agree to conform to the rules and regulations of this organization. My employment and compensation can be terminated with or without cause and with or without notice, at any time, at the option of either my employer or myself.

Signature	Date	I >

Please submit completed applications to the Human Resources Dept. Fair Lawn, NJ by fax (201) 475–2170 or e-mail <u>HR@kuikenbrothers.com</u>. Questions, call the Human Resources Department (201) 796–2082