

APPLICATION FOR EMPLOYMENT

Ruekert & Mielke, Inc. considers applicants for all positions without regard to race, color, religion, ancestry, national origin, sex, age, disability, marital status, veteran status, military status, sexual orientation, arrest record or conviction, use of lawful products or any other characteristic protected by federal and state law. Ruekert & Mielke, Inc. is an equal opportunity employer and an "at will" employer. The information will not be shared with those individuals involved in the interviewing process.

Please print clearly in ink and complete all information requested.

Position Applied For:		Date Of Application:	
Name			
Last:		First:	Middle:
Street Address:		City:	State: Zip Code:
Phone Number (day):		Phone Number (evening):	

PERSONAL INFORMATION

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in the United States?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you at least 18 years of age or older? If "No", a work permit may be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
For reference purposes, have you worked or attended school under a former name? If yes, please list former name(s): _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever filed an application with Ruekert & Mielke, Inc. before? If yes, please provide date(s): _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been employed with Ruekert & Mielke, Inc. before? If yes, please provide dates and position: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any relatives or members of your household currently employed with Ruekert & Mielke, Inc.? If yes, please provide full name: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you able to perform the essential functions of the position applied for, either with or without reasonable accommodation? If no, please explain: _____ <i>The essential functions of the position are described in the job description.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had any job-related training in the United States military? If yes, please describe: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have any pending arrests or have you ever been convicted of a crime? If yes, please provide dates(s) and details: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Answering "Yes" to either part of the preceding question does not constitute an automatic bar from employment. Factors such as date of the offense, seriousness and nature of the violation to the position applied for will be taken into account.</i>		
Have you ever been discharged from any employment, asked to resign or advised that if you did not resign, your employment would be terminated? If yes, please explain: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

APPLICATION FOR EMPLOYMENT**EMPLOYMENT HISTORY**

Employer: _____

Address: _____ Phone: _____

May we contact this employer? ☐ Yes ☐ No

Immediate Supervisor and Title: _____

Dates Employed: _____
month/year from month/year to

Final Job Title: _____

Final Compensation: ☐ Hourly ☐ Salary \$ _____ per _____
hour, week, month, year, etc.

Commission/Bonus/Other Compensation: \$ _____

Reason For Leaving: _____

Employer: _____

Address: _____ Phone: _____

May we contact this employer? ☐ Yes ☐ No

Immediate Supervisor and Title: _____

Dates Employed: _____
month/year from month/year to

Final Job Title: _____

Final Compensation: ☐ Hourly ☐ Salary \$ _____ per _____
hour, week, month, year, etc.

Commission/Bonus/Other Compensation: \$ _____

Reason For Leaving: _____

Employer: _____

Address: _____ Phone: _____

May we contact this employer? ☐ Yes ☐ No

Immediate Supervisor and Title: _____

Dates Employed: _____
month/year from month/year to

Final Job Title: _____

Final Compensation: ☐ Hourly ☐ Salary \$ _____ per _____
hour, week, month, year, etc.

Commission/Bonus/Other Compensation: \$ _____

Reason For Leaving: _____

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SKILLS AND QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

EDUCATIONAL BACKGROUND

	NAME AND LOCATION OF SCHOOL	MAJOR/MINOR	YEARS COMPLETED	DIPLOMA/DEGREE
HIGH SCHOOL				
COLLEGE				
GRADUATE				
VOCATIONAL				

REFERENCES

Please provide the following information for three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

NAME	TITLE	HOW KNOWN	TELEPHONE #	YEARS KNOWN

I certify that all information I have provided in order to apply for and secure work with Ruekert & Mielke, Inc. is true, complete and correct. I expressly authorize, without reservation, Ruekert & Mielke, Inc., its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding Ruekert & Mielke, Inc. its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me. I understand that Ruekert & Mielke, Inc. does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to (i) eliminate me from further consideration for employment or (ii) may result in my immediate discharge from Ruekert & Mielke, Inc.'s service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept the terms of the foregoing Applicant Statement.

Your typed signature represents your electronic signature for this Application

Signature of Applicant _____ Date _____

**EQUAL EMPLOYMENT OPPORTUNITY
AND AFFIRMATIVE ACTION
VOLUNTARY SELF-IDENTIFICATION FORM**

APPLICANT'S NAME:	
POSITION APPLYING FOR:	DATE:
<p>Ruekert & Mielke, Inc. (R/M) is committed to the concept and practice of Non-Discrimination, Equal Employment Opportunity and Affirmative Action. R/M will provide Equal Employment Opportunities to all staff and applicants without regard to race, color, religion, ancestry, national origin, sex, age, disability, marital status, veteran status, military status, sexual orientation, arrest record or conviction, use of lawful products or any other characteristic protected by Federal and State law. R/M's Equal Employment Opportunity and Affirmative Action Policies apply to all areas of employment including recruitment, placement, hiring, training, promotion, transfer, termination and lay off. These Policies also apply to all personnel procedures including compensation, benefits, discipline, training, recreational and social activities and safety and wellness programs.</p> <p>As a federal contractor, Ruekert & Mielke, Inc. is subject to certain governmental record-keeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, R/M invites you to voluntarily self-identify your gender and race/ethnicity.</p> <p>Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.</p>	
GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female	
RACE / ETHNIC IDENTIFICATION:	
<p>ARE YOU HISPANIC OR LATINO? - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.</p> <p><input type="checkbox"/> Yes, please skip to the next page</p> <p><input type="checkbox"/> No, please identify your race below (select only one)</p> <p><input type="checkbox"/> WHITE (NOT HISPANIC OR LATINO) – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.</p> <p><input type="checkbox"/> BLACK OR AFRICAN AMERICAN (NOT HISPANIC OR LATINO) – A person having origins in any of the black racial groups of Africa.</p> <p><input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (NOT HISPANIC OR LATINO) – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.</p> <p><input type="checkbox"/> ASIAN (NOT HISPANIC OR LATINO) – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.</p> <p><input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE (NOT HISPANIC OR LATINO) – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.</p> <p><input type="checkbox"/> TWO OR MORE RACES (NOT HISPANIC OR LATINO) – All persons who identify with more than one of the above five races.</p> <p><input type="checkbox"/> I DO NOT WISH TO SELF-IDENTIFY MY RACE/ETHNICITY</p>	

**EQUAL EMPLOYMENT OPPORTUNITY
AND AFFIRMATIVE ACTION
VOLUNTARY SELF-IDENTIFICATION FORM**

HOW WERE YOU REFERRED TO THIS POSITION:

☐ NEWSPAPER ADVERTISEMENT _____
(name of newspaper)

☐ MAGAZINE ADVERTISEMENT _____
(name of magazine)

☐ WEBSITE ADVERTISEMENT _____
(name of website)

☐ OTHER ADVERTISEMENT _____
(name of publication)

☐ EMPLOYEE REFERRAL _____
(name of employee)

☐ EMPLOYMENT AGENCY _____
(name of agency)

☐ TEMPORARY AGENCY _____
(name of agency)

☐ GOVERNMENT AGENCY _____
(name of agency)

☐ RECRUITER _____
(name of recruiter)

☐ SCHOOL/COLLEGE _____
(name of school/college)

☐ STATE JOB SERVICE _____
(name of service)

☐ OTHER _____
(name of other source)

☐ WALK IN