



The Experts in Food Processing Equipment

An Equal Opportunity Employer

115 Commercial Drive
PO Box 31
Columbus, WI 53925

Revised – 1/18

EMPLOYMENT APPLICATION

LYCO Manufacturing is an equal opportunity employer and fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status or disability, or any other basis prohibited by federal, state, or local law. As an equal opportunity employer, we intend to comply fully with all federal, state, and local laws and the information requested on this application will not be used for any purpose prohibited by law. Disabled applicants may request any needed accommodation.

| | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--|
| DATE: | | | | | |
| POSITION APPLIED FOR: | | | | | |
| NAME: | | | | | |
| | Last | | First | | Middle |
| ADDRESS: | Street: | | | | |
| | City/State/Zip: | | | | |
| PHONE: | Mobile: | | | Landline: | |
| GOOD TIME(S) TO CALL: | | | | | |
| E-MAIL ADDRESS: | | | | | |
| Have you been previously employed by this company? (Mark with an (x)) | | | <input type="checkbox"/> | Yes | <input type="checkbox"/> No |
| If yes, when? | | | In what capacity? | | |
| Who referred you to this company? | | <input type="checkbox"/> | Job Board Posting | <input type="checkbox"/> | Paper Advertisement |
| | | <input type="checkbox"/> | Job Service | <input type="checkbox"/> | Employment Agency |
| | | <input type="checkbox"/> | Other (Explain) | <input type="checkbox"/> | Friend/Relative |
| Shift preference: | <input type="checkbox"/> | Day Shift | <input type="checkbox"/> | Night Shift | <input type="checkbox"/> Will work any available shift |
| Date available to start: | | | Wage/Salary desired: | | |

PERSONAL DATA

Are you a United States citizen or do you have an entry permit which allows you to lawfully work in the U.S.? (If offered employment, you will be required to provide documentation verifying your eligibility.)

☐ Yes ☐ No

Are you at least 18 years old? ☐ Yes ☐ No

Have you ever been convicted of a felony? ☐ Yes ☐ No

If yes, please explain: 1) nature of crime, 2) date of conviction, and 3) county and state where issued.

(The Wisconsin Fair Employment Act expressly prohibits an employer from refusing to employ a person with a conviction record unless the circumstances of the conviction substantially relate to circumstances of the particular job. A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.)

EDUCATION

| | Name and Location of <u>School</u> | No./Years <u>Completed</u> | Did you <u>Graduate</u> | Course of <u>Study</u> | <u>Degree</u> |
|-------------|--|-------------------------------|----------------------------|---------------------------|---------------|
| High School | _____ | _____ | _____ | _____ | _____ |
| College | _____ | _____ | _____ | _____ | _____ |
| Other | _____ | _____ | _____ | _____ | _____ |

List any special skills or qualifications which you feel are relevant to the job for which you are applying:

MILITARY

Branch _____

What were your duties _____

Did you receive any specialized training? ☐ Yes ☐ No

If yes, describe _____

EMPLOYMENT HISTORY

Please give accurate and complete information. Start with present or most recent employer:

Company Name _____ Telephone No. _____

Address _____ Employed from ____/____/____ to ____/____/____

Name of Supervisor _____ Hourly Pay: Start _____ Last _____

Position and Responsibilities _____

Reason for Leaving _____

Company Name _____ Telephone No. _____

Address _____ Employed from ____/____/____ to ____/____/____

Name of Supervisor _____ Hourly Pay: Start _____ Last _____

Position and Responsibilities _____

Reason for Leaving _____

Company Name _____ Telephone No. _____

Address _____ Employed from ____/____/____ to ____/____/____

Name of Supervisor _____ Hourly Pay: Start _____ Last _____

Position and Responsibilities _____

Reason for Leaving _____

Company Name _____ Telephone No. _____

Address _____ Employed from ____/____/____ to ____/____/____

Name of Supervisor _____ Hourly Pay: Start _____ Last _____

Position and Responsibilities _____

Reason for Leaving _____

REFERENCES

May we communicate with your present employer? ☐ Yes ☐ No

List three people (no relatives) you have worked with, that you do not live with and whom we may contact for a reference.

| | | |
|-------|-----------------------|-------|
| Name | Relation to Applicant | Phone |
| <hr/> | | |
| Name | Relation to Applicant | Phone |
| <hr/> | | |
| Name | Relation to Applicant | Phone |
| <hr/> | | |

Please read the following statements carefully before you sign your name.

"I HEREBY CERTIFY that the answers given by me to the above questions and statements are true and correct and hereby authorize you to contact references, past or present employers, persons, schools, law enforcement agencies and any other sources of information which may be relevant to my application for employment.* It is understood and agreed that any misrepresentation, false statement, or omissions by me in this Application will be sufficient reason for rejection of my application or for dismissal at any time during my employment, without liability to this Company. This includes furnishing a false name or social security number. I have read, understand and agree to the above statement. (Please initial here). _____

I further understand that no representative of the Company has the authority to enter into any agreement for employment for any specified period of time and that this Company is not guaranteeing employment for anyone. No employment contract is created by virtue of my being hired by this Company, and, if hired, my employment will be at will and may be terminated at any time without prior notice. I have read, understand and agree to the above statement. (Please initial here). _____

I authorize Lyco Manufacturing, Inc. to contact the references I have provided, for verifying my past employment and performance. (Please initial here). _____

If employed, I agree to abide by all of the work and safety rules of the Company. I understand that this Company is committed to maintaining a drug-free workplace. I am aware that the Company may require a drug test as a part of the hiring process. Also, if employed, I realize that the Company conducts reasonable suspicion, periodic and/or random drug and/or alcohol testing of its employees. I have read, understand and agree to the above statement. (Please initial here). _____

I understand that this application will remain on file for 60 days for consideration. After 60 days, if I am still interested in a position with this Company, it will be necessary for me to complete a new application form."

SIGN HERE _____ DATE _____