



SUPERIOR CRANE CORP
HEALY MANUFACTURING GROUP

Employment Application Form

Your Contact Information

| | | | |
|--------------------------------|-----------------------|-------------|----------|
| Position you are Applying for: | Rate of Expected Pay: | | |
| Your Name: | _____ | | |
| | Last | First | MI |
| Your Mailing Address: | _____ | | |
| | Street Address | Box/PO # | Apt. # |
| | _____ | _____ | _____ |
| | City | State | Zip Code |
| Contact Information: | _____ | | |
| | Home phone number | cell number | email |
| Date Available for Work: | _____ | | |

Personal Information

What type of position (s) will you accept: Full-time Temporary Part-time Summer
 First shift Second shift

Are you legally eligible to work in the United States and can you provide, upon hire, documentation of your eligibility? Yes No

Are you 18 yrs or older? Yes No

For the job you are applying for, do you have any physical or mental condition that would prevent you from performing the essential duties of the job with reasonable accommodations? Yes No

Other names you have used (if applicable): _____

Have you ever worked for Superior Crane? Yes No If yes, Hire Date and location: _____ Exit Date: _____

Are any relatives employed at Superior Crane: Yes No If yes, whom and location: _____
 Relationship: _____

As an adult, have you ever been convicted of a felony? Yes No If yes,
 When and where: _____
 Reason : _____

Note: Conviction does not create an automatic bar to employment.

Have you ever been dismissed or released from employment or have you ever resigned to avoid discharge? Yes No
 If yes, please explain: _____

Experience

Provide employment history starting with your current or most recent job. Attach a sheet of paper if additional space is needed.

| | | |
|--|----------|--|
| From _____ | To _____ | Title _____ |
| Company Name _____ Type of Business _____ Address _____ City _____ State _____ | | Phone _____ Okay to contact? No Yes |
| Supervisor's Name & Title | | Starting Salary _____ |
| Description of Duties: | | Ending Salary: _____ |
| Reason for leaving: | | |
| | | |
| From _____ | To _____ | Title _____ |

| | | |
|--------------------------------------|-------|-------------------------------|
| Company Name _____ | | Phone _____ |
| Type of Business _____ | | Okay to contact? No Yes |
| Address _____ City _____ State _____ | | |
| Supervisor's Name & Title | | Starting Salary _____ |
| Description of Duties: | | Ending Salary: _____ |
| Reason for leaving: | | |
| | | |
| From _____ To _____ | Title | |
| Mo/Day/Yr Mo/Day/Yr | | |
| Company Name _____ | | Phone _____ |
| Type of Business _____ | | Okay to contact? No Yes |
| Address _____ City _____ State _____ | | |
| Supervisor's Name & Title | | Starting Salary _____ |
| Description of Duties: | | Ending Salary: _____ |
| Reason for leaving: | | |

EDUCATION, CERTIFICATION, AND SKILLS

| | |
|---|--|
| Check the highest Grade/year completed: | <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 17+ Did you receive a high school diploma? <input type="radio"/> Yes <input type="radio"/> No GED? <input type="radio"/> Yes <input type="radio"/> No |
| High School | Name of School _____ City _____ State _____ |

List your college, business, trade, correspondence or other courses below. Start with highest level.

| Name of School | City | State | Major | # of Years | Degree/Certificate |
|----------------|------|-------|-------|------------|--------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

List any special skills or abilities, experiences or accomplishments. List any license/certificates or other special job related skills and qualifications acquired from employment or other experience that might enhance your selection for this position (for example, bi-lingual, computer skills, tools, blueprint reading, machine operation, machine set up, measuring equipment, etc.).

REFERENCES

| NAME | ADDRESS | PHONE NUMBER | YEARS KNOWN | |
|------|---------|--------------|-------------|-----------------|
| | | | | Business |
| | | | | Business |
| | | | | Personal |

How did you find out about this job opportunity?

| | | |
|-------------------------|------------------|-----------------------------|
| Superior Crane Employee | Newspaper/School | Job Service Website |
| Name of EE _____ | Which one? _____ | |
| Recruiter | Temp Agency | Walk-in Job Announcement |
| Name _____ | Name _____ | |

CERTIFICATE OF APPLICANT

I certify that all statements made in this application, including any attachments, are true and complete to the best of my knowledge. I understand that any false statements of material facts will subject me to disqualification or dismissal if hired. All employees will be required to submit documentation, including, but not restricted to, passport, birth certificate, Social Security card, resident alien card, and/or driver's license, verifying citizenship and eligibility to work in the United States. When applicable, employees will also be required to submit copies of educational diploma/certificate and /or military discharges. I release Superior Crane from any liability for the use of aforesaid information. Superior Crane requires that all applicants who receive a job offer successfully pass reference checks, drug screens and physicals.

Name (please print)

Signature

Date