

# Application for Employment

An Equal Opportunity Employer



Global Finishing Solutions L.L.C.

**12731 Norway Road • Osseo, WI 54758**  
**(800)848-8738 or (715)597-3168**  
**fax: (715)597-2193**

You must fully and accurately complete this Application for Employment.  
*Incomplete applications will NOT be considered.*

|                 |       |        |                         |  |  |
|-----------------|-------|--------|-------------------------|--|--|
| Name:           |       |        | Social Security Number: |  |  |
|                 |       |        | -      -                |  |  |
| Last            | First | Middle |                         |  |  |
| Present Address |       |        | Phone Number:           |  |  |
|                 |       |        | (      )                |  |  |
| Street          | City  | State  |                         |  |  |
| Prior Address:  |       |        | Referred by:            |  |  |
|                 |       |        |                         |  |  |
| Street          | City  | State  |                         |  |  |

|  |   |
|--|---|
| <input type="checkbox"/> Yes <input type="checkbox"/> No | If you are hired, can you supply proof of your age?   |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | If you are hired, can you supply the required documentation to verify your lawful right to work in the United States? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Have you ever been convicted of a felony? If yes, please explain:<br>_____  |

|   |                     |                 |
|---|---------------------|-----------------|
| Position Desired:   | Date you Can Start: | Salary Desired: |
|   |                     |                 |
| Desired Shift – <i>For Production/Manufacturing Positions:</i>  |                     |                 |
| <input type="checkbox"/> First shift (5:00 am - 3:30 pm) <input type="checkbox"/> Second shift ( 3:30 pm – 2:00 am) |                     |                 |

|  |   |
|--|---|
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you Employed now?   |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | If Yes, may we inquire of your present employer?                  |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Have you ever been employed by this company before? If yes, when? |

| Education     | Name of School | No. Years Attended | Graduated?   | Subjects Studied/ Degree |
|---------------|----------------|--------------------|--|--------------------------|
| High School:  |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                          |
| College:      |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                          |
| Trace School: |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                          |
| Other:        |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                          |

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Former Employers: (Most Recent Employer First)

| Date:<br>Month/Year   | Name and Address of Employer | Salary | Position | Reason for Leaving |
|---|------------------------------|--------|----------|--------------------|
| From<br>To  |                              |        |          |                    |
| From<br>To  |                              |        |          |                    |
| From<br>To  |                              |        |          |                    |
| From<br>To  |                              |        |          |                    |
| From<br>To  |                              |        |          |                    |
| From<br>To  |                              |        |          |                    |
| Which of these employers can we contact for a reference regarding your job performance? |                              |        |          |                    |

I certify that all facts contained in this application are true and complete to the best of my knowledge. I understand that omission or misrepresentation of facts may be grounds for rejection of this application or for dismissal from employment if subsequently discovered.

I authorize investigation of all statements contained herein, references listed above, any and all information concerning my previous employment and any pertinent information, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period, and regardless of the date of payment of my wages or salary, I may be terminated at any time without any prior notice. I further understand that only the employer's president or another person specifically designated by the employer's president has the authority to create or enter into any employment agreement on behalf of the employer.

In consideration of my employment, I agree to comply with all rules, regulations, and employment policies of the employer.

*I understand and agree that, if hired, my employer is required to provide the Social Security Administration and if necessary the Department of Homeland Security, with the information from each new employee's Form I-9 to confirm work authorization.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## EEOC DATA RECORD

Applicants are considered for employment, and employees are treated during employment without regard to race, religion, sex, national origin, age, military status, disability, or veteran status.

As an employer, we are subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, we invite employees and applicants to voluntarily self-identify their race and ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information 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.

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Date: \_\_\_\_\_ Position (s) Applied for or Currently Holding: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street City State Zip

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### AFFIRMATIVE ACTION SURVEY

Gender (check one): \_\_\_\_\_ Male \_\_\_\_\_ Female

Ethnicity: **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.

\_\_\_\_\_ Yes \_\_\_\_\_ No

Race: If you answered No the above question, please check one of the following:

\_\_\_\_\_ **White** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

\_\_\_\_\_ **Black or African American** – A person having origins in any of the Black racial groups of Africa.

\_\_\_\_\_ **Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

\_\_\_\_\_ **Asian** – 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.

\_\_\_\_\_ **American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

\_\_\_\_\_ **Two or More Races** – All persons who identify with more than two of the above races.