# PORTA-DOCK, INC. EMPLOYMENT APPLICATION 175 3<sup>rd</sup> St., Dassel, MN 55325 320-275-3312

## **An Equal Opportunity Employer**

Porta-Dock, Inc. is an Equal Opportunity Employer. Porta-Dock, Inc does not discriminate on the basis of race, religion, color, sex, age, national origin, or disability, or on any basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

Please print and fill out all sections

Applicant Information	
Applicant Name	Home Phone
Email Address	Other Phone:
Current Address: Number and Street	
City	State & Zip
How were you referred to Porta-Dock, Inc.?	
Employment Positions	
Position(s) applying for:	
Have you ever _ applied for work or _ worked for Porta  If yes, please explain:  Are you applying for:	
Temporary work – such as seasonal? Yes     Regular part-time work? Yes No     Regular full-time work? Yes No  Available start date?/////	No
What days and hours are you available for work?	
If applying for temporary, when will you be available? _	
Are you available to work overtime on weekends and/or	evenings? Yes No
Salary desired: \$	

### **Personal Information**

If hired, would you have transportation to/from work? Yes No
Are you over the age of 18? (If under 18, hire is subject to verification of minimum legal age.) Yes No
If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? Yes No
This position may require lifting of 50 lbs. repeatedly and 75 lbs. on occasion, are you able to perform this with/without reasonable accommodations? Yes No
This position may require working outside in all weather conditions at times, are you able/willing to perform the required duties under these conditions? Yes No
Are you able to perform the essential functions of the job for which you are applying, either with / without reasonable accommodation? Yes No
Education, Training and Experience
High School
School Name:
Address: City, State, Zip:
Number of years completed: Did you graduate? Yes No
Other (Specify Type):
College/University/Vocational School
School Name:
Address: City, State, Zip:
Number of years completed: Did you graduate? Yes No
Degree / diploma earned:
Military
Branch: Rank in Military:
Total Years of Service: Skills/duties:
Related details:
Do you have any other certifications, experience, training, qualifications, or skills which you feel should be brought to our attention, in the case that they make you especially suited for working with us?  Yes No  If yes, please explain:

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# **Employment History**

Below, please describe past and present employ for all periods of unemployment. <b>Even if you ha</b> completed.	ment pos	ched a resume, this section must be
•		Business Type:
me of Employer: Business Type: me of Supervisor: Telephone Number:		
	City, State, Zip:	
Length of Employment (Include Dates):		
Position & Duties:		
Reason for Leaving:		
May we contact this employer for references?	Yes	No
Name of Employer:		Business Type:
Name of Supervisor:	Telep	hone Number:
ddress: City, State, Zip:		
Length of Employment (Include Dates):		
Position & Duties:		
Reason for Leaving:		
May we contact this employer for references?	Yes	No
Name of Employer:		Business Type:
Name of Supervisor:	Telep	hone Number:
Address:	City,	State, Zip:
Length of Employment (Include Dates):		
Position & Duties:		
Reason for Leaving:		
May we contact this employer for references?	Yes	No
If there has been a gap in employment of m	nore tha	n 6 months, please provide details below.

### References

List below three (3) persons who have knowledge of your work performance within the last four (4) years. Please include professional references only.

Name - First, Last: _	Occupation:
Telephone Number:	Number of Years Acquainted:
Address:	City, State, Zip:
Name - First, Last: _	Occupation:
Telephone Number:	Number of Years Acquainted:
Address:	City, State, Zip:
Name - First, Last: _	Occupation:
Telephone Number:	Number of Years Acquainted:
Address:	City, State, Zip:
Please Read and In	itial Each Paragraph, then Sign Below
any omission (including employment can be gro immediate expulsion from initial I understand that nothing during my employment addition, I understand aperiod and may be term either myself or Porta-Employment initial I permit Porta-Dock, Incinformation I have proved and my profession release Porta-Dock, Incinformation Inc	ng contained in the application, or conveyed during any interview which may be granted, or if hired, is intended to create an employment contract between Porta-Dock, Inc. and me. In and agree that if I am employed, my employment is at will and is for no definite or determinable binated at any time, with or without prior notice, or with or without cause, at the option of
initial	and the material and an entire and any may related to out an entire and an entire and
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