

Employment Application



M.C. GILL CORPORATION
 4056 Easy Street, El Monte, California 91731
 Telephone (626) 443-6094



CASTLE INDUSTRIES, INC. OF CALIFORNIA
 601 South Dupont Avenue, Ontario, California 91761-1502
 Telephone (626) 390-0899

“An Equal Opportunity Employer”

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, sexual identity, marital or veteran status, the presence of non-job related medical condition or disability, or any other legally protected status.

GENERAL					
Last Name	First Name	Middle Name	Are you over age 18?	Social Security Number (Optional)	
			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Street Address		City	State	Zip	Area Code Telephone No.
Describe the work you are best qualified for				Cellular ()	Home ()
Date Available	How were you referred?	After employment can you submit validation of your legal right to work in the U.S.?			
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever worked here before?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
Have you ever applied here before?		Shift Preference	Are you willing to work overtime?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted of a crime? <small>Do not disclose marijuana convictions or arrests removed from your record.</small>			Do you have a valid driver's license? (For driving positions only)		
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No		
					Expected Wage

MILITARY SERVICE			
Service Branch		Initial Rank	Final Rank
Major Duties		Service School	Honorable Discharge <input type="checkbox"/> Yes <input type="checkbox"/> No

EDUCATION			
High School (Name, City, State)	Major	Yrs. Completed 9 10 11 12	Diploma
College (Name, City, State)	Major	Yrs. Completed 9 10 11 12	Degree
Other	Major	Yrs. Completed	Degree
Other	Major	Yrs. Completed	Degree
Are you pursuing a course of study now? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter: Subject ▶			
Name and location of institution. ▶			

SPECIAL SKILLS			
<input type="checkbox"/> Typing	Kind/Type	Speed	Yrs. Exp.
<input type="checkbox"/> Shorthand	Kind/Type	Speed	Yrs. Exp.
Can you read blueprints?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> PC	Kind/Type	Yrs. Exp.	
<input type="checkbox"/> Software Programs	Kind/Type	Yrs. Exp.	
<input type="checkbox"/> Equipment	Kind/Type	Yrs. Exp.	
Other -- Please specify any other skills, qualifications, or experience that you have with years of experience to be considered in job placement.			

EMPLOYMENT HISTORY

Please complete last ten years employment history even if supplemented by resume.
Include military service and self employment. Account for all periods of unemployment.

Current or Most Recent Employer	Area Code Telephone ()	From Mo. Yr.	To Mo. Yr.
Address		Salary or Wage Start End	
Supervisor's Name	May we contact your supervisor?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Most liked about this job
Your Position and Duties		Least liked	
		Reason for leaving or considering a change at this time.	
Previous Employer	Area Code Telephone ()	From Mo. Yr.	To Mo. Yr.
Address		Salary or Wage Start End	
Supervisor's Name		Most liked about this job	
Your Position and Duties		Least liked	
		Reason for leaving	
Previous Employer	Area Code Telephone ()	From Mo. Yr.	To Mo. Yr.
Address		Salary or Wage Start End	
Supervisor's Name		Most liked about this job	
Your Position and Duties		Least liked	
		Reason for leaving	
Previous Employer	Area Code Telephone ()	From Mo. Yr.	To Mo. Yr.
Address		Salary or Wage Start End	
Supervisor's Name		Most liked about this job	
Your Position and Duties		Least liked	
		Reason for leaving	

PROFESSIONAL REFERENCES

List three previous managers, supervisors or business associates (other than relatives)
who know your qualifications.

Complete Name	Address and Work and/or Home Phone Numbers	Position and Work Relationship	Company Affiliations
Complete Name	Address and Work and/or Home Phone Numbers	Position and Work Relationship	Company Affiliations
Complete Name	Address and Work and/or Home Phone Numbers	Position and Work Relationship	Company Affiliations

I hereby certify that the answers given by me to the foregoing questions and statements are true and correct and hereby authorize M.C. Gill to verify same. If employment is obtained under this application I will comply with all orders, rules and regulations of the company. I also authorize my former employers and educational institutions to give any information they may have regarding me. I hereby release them and their organizations from all liability for any damage whatsoever for issuing same. If upon investigation, anything in this application is found either to be untrue or omitted or materially misrepresented, I understand that I may not be hired by M.C. Gill or may be subject to dismissal at any time during the period of employment, if hired. In consideration of my employment, I agree to conform to the rules and regulations of the Company, and agree that my employment can be terminated, with or without cause, and with or without notice at any time at the option of either the Company or myself.

Please Sign Here

Signature

Date

FOR COMPANY USE ONLY

Start Date _____ Employee No. _____

Job Title _____ Pay Rate _____

Department _____ Shift _____

Supervisor _____ Hours _____

APPLICANT AFFIRMATIVE ACTION INFORMATION

It is the policy of M. C. Gill Corporation to provide equal employment opportunity to all qualified applicants for employment without regard to race, color, religion, national origin, sex, age, veteran status or disability. As an affirmative action employer under E.O. 11246 we invite all applicants to identify themselves as indicated below.

COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY AFFECTS THE DECISION REGARDING YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.

PLEASE PRINT

Name _____ Soc. Sec. #: _____ Date _____
Last First Middle

Sex: Male Female

Position applied for (list only one) _____

Where did you hear about this job? _____

Racial Origin (You may mark one or more of the following):

- White** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- 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.
- Black or African American** – A person having origins in any of the black racial groups of Africa.
- 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.
- Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Signature _____

OFFICE USE ONLY

Application Status: _____

Initials _____
H.R. Representative

Employment Status: 1 2 3 4 5 6 7 8 9 N O