



KeyTronicEMS
Trust. Commitment. Results.

4424 N. Sullivan Road - Spokane Valley, WA 99216 - (509) 928-8000

Application for Employment

WE ARE AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER. We consider all qualified applicants regardless of race, religion, color, age, gender, sexual orientation, marital or veteran status, national origin or non-disqualifying disability.

Instructions:

- ◆ Answer all items, even if you have a resume.
- ◆ Print or write clearly, **do not type.**
- ◆ Sign and date the application in the space indicated.

GENERAL INFORMATION

Last Name:		First Name		Middle Initial:	
Present Street Address:			City:	State:	Zip:
Previous Address (if at present address less than 3 years):			City:	State:	Zip:
Telephone Number(s):			Emergency Contact & Phone number:		
Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you applied for work here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?		Are you or will you be authorized to work in the United States at the expected time of employment?	
Have you worked for KeyTronicEMS before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when and what position? _____ _____		Do any of your relatives or persons of the same household work here? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list their names: _____ _____			
Other names you have used and dates:					

POSITION INFORMATION

1. Position Desired: _____ Date you are available to start: _____
2. Desired salary range for the position you are applying for: _____
3. Have you done this type of work before? If yes, where: _____
4. List any certificates or licenses you hold related to your qualifications for the work you seek:

5. List other jobs that you may be qualified for: _____
6. How were you referred to us?

<input type="checkbox"/> Newspaper	<input type="checkbox"/> Employee referral (name) _____	<input type="checkbox"/> School (name) _____
<input type="checkbox"/> Walk in	<input type="checkbox"/> Agency (name) _____	<input type="checkbox"/> Other (name) _____

Position Information Cont.

7. Check if you are willing to accept regular work on:

Full Time Part Time
 1st Shift: Days 2nd Shift: Swing 3rd Shift: Nights On Call Temp/Seasonal Weekends

8. Can you stay late on short notice if required? Yes No

9. Any prior commitments which would require absence of more than a few hours in the next 12 months? Yes No

If yes, please explain: _____

10. Are you now, or do you expect to be engaged in any other business or employment? Yes No

If yes, please explain: _____

EDUCATION

	School Name and Full Address	Attended Dates		Graduated?	Degree & Major Area	G.P.A.
		From:	To:			
High School						
Community/ Jr. College						
College University						
Trade, Business, Other						
Are you currently a student? If yes, where?		Scholastic Honors received:		Plans for future education/training:		

EMPLOYMENT EXPERIENCE - Start with PRESENT or most recent employer. Include MILITARY experience or volunteer work if full time or your major activity.

Name of Organization	Street Address	City	State	Zip	Phone Number:
Job Title:			Dates of Employment: (month & year) _____ to _____		
Supervisor's Name and Title:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employment Status: <input type="checkbox"/> FT <input type="checkbox"/> PT	Reason for Leaving:	
Job Duties:					

Employment Cont.

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Job Duties:					

OTHER SKILLS AND QUALIFICATIONS:

Please mention any other skills, qualifications or experience pertinent to the career you seek (e.g. - Computers, software, machines, tools, special certifications, etc.) _____

REFERENCES: Not former employers

Name	Address, City, State, Zip	Phone Number	Occupation
1.			
2.			
3.			

APPLICANT'S STATEMENT:

I hereby affirm that the information provided on this application and accompanying letters or resume is true and complete to the best of my knowledge. I also agree that any false information or omissions may disqualify me from consideration for employment or result in my termination if discovered any time after my employment date. As a condition of employment, I authorize Key Tronic Corporation to investigate my background thoroughly; agree to assist in such investigation; and release and hold harmless and agree not to bring any claim against Key Tronic Corporation or any other entity or person providing information concerning any portion of my background. I agree to submit to any drug test that may be required by the employer for my hiring or continued employment. I understand that refusal to take such tests may be cause for denial of employment or my termination. I also understand that employment may be conditioned upon an investigation into criminal convictions on record with local, State or Federal law enforcement authorities.

I also understand, that if hired, my employment is not for any specific period or duration and is terminable at will by the employer or me at any time with or without cause or notice. I understand this application is not intended to be a contract. I agree to present personal photo identification and proof of U.S. citizenship or documentation of my authorization to work and reside in the United States, promptly upon confirmation of hiring, and that failure to do so voids any offer of employment.

Signature of Applicant

Today's Date