



Ohio Steel Industries Inc

Contact Email: Hr@ohiosteel.com

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Application information

Full Name: _____ Date: _____
Last First M.I.

Address: _____ Phone: _____
Street address Apt/Unit #

_____ Email: _____
City State Zip Code

Position Applied For: _____ Date Available: _____ Desired Salary: \$ _____

Are you 18 years of age or older? Yes No

Are you a citizen of the United States? Yes No

If no, are you authorized to work in the U.S.? Yes No

Have you ever worked for this company? Yes No If yes, when? _____

Have you ever been convicted of any law violation? Include any plea of "guilty" or "no contest". Exclude minor traffic violations. Yes No If yes, explain? _____

How did you hear about the position? _____

Education

High school: _____ Did you graduate? Yes No

College: _____ Did you graduate? Yes No

Other: _____ Did you graduate? Yes No

Previous Employment

Company: _____

Phone: _____

Address: _____

From: _____ To: _____

Job title: _____

Responsibilities: _____

May we contact your previous supervisor for a reference?

Yes

No

Company: _____

Phone: _____

Address: _____

From: _____ To: _____

Job title: _____

Responsibilities: _____

May we contact your previous supervisor for a reference?

Yes

No

Company: _____

Phone: _____

Address: _____

From: _____ To: _____

Job title: _____

Responsibilities: _____

May we contact your previous supervisor for a reference?

Yes

No

References

Please list three professional references.

Full name: _____

Phone: _____

Relationship: _____

Email: _____

Full name: _____

Phone: _____

Relationship: _____

Email: _____

Full name: _____

Phone: _____

Relationship: _____

Email: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at discharge: _____ Type of discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand I will be required to pass a drug screening examination. I hereby consent to a pre-and/or post-employment drug screen as a condition of employment. I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. Only the president of the organization has the authority to enter into an agreement of employment for any specified period and such agreement must be in writing, signed by the president and the employee. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without reason and with or without notice.

I have read, understand and by signature consent to these statements.

Signature: _____ Date: _____