



2410 West Aero Park Court • Traverse City, Michigan 49686 • Telephone: (231) 946-7500 •
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(PLEASE PRINT NEATLY)

Date of Application: _____

Position(s) Applied for: _____

Referral Source: Advertisement Employment Agency

Walk-In Other _____

Friend/Relative _____

1. Name: _____
Last First Middle

2. Address: _____
House Number Street City State Zip

3. Phone: _____ Cell: _____

4. If employed and under 18, can you furnish a work permit? Yes No

5. Have you filed an application here before? Yes No
Dates: _____

6. Have you ever been employed here before? Yes No
Dates: _____

7. Are you prevented from lawfully becoming employed in this country because of Visa or immigration status?
(PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT)
 Yes No

8. On what date are you available to begin work? _____

9. Employment Desired: Full Time Part time
 Shift Work Temporary

10. Are you willing to work any shift? Yes No (Explain) _____

11. Are you currently on layoff & subject to recall? Yes No
12. Can you travel if the job requires it? Yes No
13. Have you ever been convicted of a felony or misdemeanor? Yes No
14. Are there any felony or misdemeanor charges pending against you? Yes No

If you answered Yes to 13 or 14 above, please complete the following:

Date	Offense	Place	Disposition

15. Work experience - PLEASE LIST PREVIOUS THREE (3) EMPLOYERS AND BEGIN BY LISTING YOUR MOST RECENT OR PRESENT EMPLOYMENT FIRST. ATTACHING A RESUME IS *NOT*

1. EMPLOYER _____ ADDRESS _____ _____ JOB TITLE _____ SUPERVISOR _____ Reason for leaving _____	Dates Employed		WORK PERFORMED
	From	To	
	Hourly Rate/Salary		
	Starting	Final	
2. EMPLOYER _____ ADDRESS _____ _____ JOB TITLE _____ SUPERVISOR _____ Reason for leaving _____	Dates Employed		WORK PERFORMED
	From	To	
	Hourly Rate/Salary		
	Starting	Final	
3. EMPLOYER _____ ADDRESS _____ _____ JOB TITLE _____ SUPERVISOR _____ Reason for leaving _____	Dates Employed		WORK PERFORMED
	From	To	
	Hourly Rate/Salary		
	Starting	Final	

16. Education (High School & Beyond)

Type of School	Name & location of school	Number of Years Attended	Major field	Degrees awarded

17. Special Skills or Qualification

Please summarize any special skills and/or qualifications gained from previous employment or other experience:

18. Are you a Veteran of the U.S. Military? Yes No
 (Your answer to this question is voluntary, a reply is not required)

19. Do you speak/write any foreign languages? Yes No

If Yes, please specify which languages and your level of proficiency:

APPLICANT'S AGREEMENT

I affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge, and agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

(Please initial) _____

I request that previous employers contacted by Century, Inc. in connection with this application fully respond to all inquiries concerning such previous employment and specifically waive prior written notice of disclosure of my personal record information including disciplinary reports, letters of reprimand or other disciplinary action. In consideration of the acceptance of my application, I release Century, Inc. and previous employers of any claimed liability out of such response and disclosure.

(Please initial) _____

If offered employment, I give my consent for Century, Inc. to collect blood and urine specimens through an authorized testing service of its choice for the purpose of alcohol and drug-screening analysis. I understand and agree that Century, Inc. may require me to undergo a physical examination. I also consent to an investigation of my driving record. I understand that any offer of employment by Century, Inc. will be contingent upon the results of such investigation, alcohol and drug screening, and physical examination.

(Please initial) _____

I understand that, if hired, I will be an at-will employee of Century, Inc. and that my employment and compensation can be terminated at any time, with or without cause and with or without notice, at the option of either Century, Inc. or myself. I further understand that no supervisor or representative of Century, Inc., other than the President, has any authority to enter into any agreement contrary to the foregoing and that such agreement must be in writing, pertain specifically to me, and signed by the President. In consideration of such employment, I agree to conform to the rules and policies of Century, Inc., including the arbitration procedure.

(Please initial) _____

I understand and agree to hold in the strictest confidence any knowledge and information not already available to the public, respecting the inventions, designs, methods, systems, improvements, trade secrets, manufacturing techniques and processes, sales promotions and ideas, customer lists, or other confidential matters of unauthorized persons, without Century, Inc.'s prior written permission, any time during, or subsequent to, my employment with Century, Inc.

(Please initial) _____

Finally, I understand that my application will remain active for one (1) year from the date completed, after which time I will have to reapply in accordance with established Century, Inc. procedures.

(Please initial) _____

Dated: _____

Signature of Applicant

Equal Employment Opportunity Voluntary Data Sheet

In order to comply with federal equal opportunity recordkeeping and other reporting requirements, the Company asks all applicants to provide us with certain demographic information. Providing this information is strictly voluntary and will be kept separate from any resumes or other material submitted.

It will not be used in determining employment at Century, Inc.

In completing the Race/Ethnicity portion of the form, first indicate if you identify yourself as Hispanic or Latino. If you do so identify yourself, you should stop there. If you do not identify as Hispanic or Latino, then check the appropriate box to identify the race/ethnicity with which you do indentify. If you identify with two or more races, please check the “two or more race” box, and also list the single race/ethnic group with which you most identify.

Please check all categories that apply to you.

Gender/Sex: Male Female

Race/Ethnicity:

Hispanic: Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish Culture or origin, regardless of race.

OR

White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Black or African American (Not Hispanic or Latino): A person having origins in any of the Black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino): Persons having origins in the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam., etc.

American Indian / Alaskan Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North or South America who maintains tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino): All persons who identify with more than one of the above five racial/ethnic groups.

Decline to complete:

I do not wish to complete this questionnaire.

Job Applied For

Last Name First Name Middle Initial

Date