



Precision Associates, Inc.
 3800 Washington Ave. N.
 Minneapolis, MN 55412

Phone (612) 333-7464
 Fax: (612) 342-2417
 Toll: (800) 394-6590

APPLICATION FOR EMPLOYMENT

We are pleased that you are interested in seeking employment opportunities with us. We consider all applicants for employment based solely on job-related qualifications without regard to race, color, national origin, religion, gender, age, citizenship, marital, or veteran status, or the presence of a medical condition or disability. Please complete the following **fully** and **accurately**. All of the information you provide is subject to verification.

GENERAL INFORMATION

Print all information in block style lettering.

LAST NAME		First	WWW Middle
HOME ADDRESS			Apartment No.
City		State	Zip Code
HOME PHONE	ALTERNATE PHONE(s) Ext. _____ Type _____		Are you legally entitled to work in the U.S.? Yes No
Type of work or position desired?		Salary Desired? \$ _____ Per Hour Month Year	
Shift Desired? (Select all that apply) 1 st 2 nd 3 rd Full-time Part-time?		Are you willing to work overtime as required? Yes No	

Education

	Print The Name And Address Of Each School Attended	# Of Years Completed	Graduate?	Course(s) of Study	Degree Earned
High School			Y or N		
College/Vocational			Y or N		
Trade School			Y or N		
Other _____			Y or N		

Have you completed any other courses or training programs useful to your job skills? If yes, please explain.

EMPLOYMENT HISTORY

This portion of the application must be completed even if supplemented by a resume. **Start with your most recent employment** and list all jobs you have held in the past 10 years. Use a separate sheet if necessary. Cover full disposition of your time whether employed or not. Additional information may be written on a separate sheet and attached. PLEASE COMPLETE CAREFULLY. **DO NOT WRITE "PLEASE SEE RESUME."** If an additional sheet is attached, place a check mark (√) here. If a resume is attached.

Employer:	Telephone Number:	From (Month/Year)
Address:		
City:	State:	Zip:
Job Title:	Supervisor:	
Specific Duties:		Hours Per Week
		Last Salary Earned
Reason for Leaving:		May We Contact this Employer? Yes No

Employer:	Telephone Number:	From (Month/Year)
Address:		
City:	State:	Zip:
Job Title:	Supervisor:	
Specific Duties:		Hours Per Week
		Last Salary Earned
Reason for Leaving:		May We Contact this Employer? Yes No

Employer:	Telephone Number:	From (Month/Year)
Address:		
City:	State:	Zip:
Job Title:	Supervisor:	
Specific Duties:		Hours Per Week
		Last Salary Earned
Reason for Leaving:		May We Contact this Employer? Yes No

Employer:	Telephone Number:	From (Month/Year)
Address:		
City:	State:	Zip:
Job Title:	Supervisor:	
Specific Duties:		Hours Per Week
		Last Salary Earned
Reason for Leaving:		May We Contact this Employer? Yes No

CERTIFICATION, AUTHORIZATION AND AGREEMENT

PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH.

THEN, SIGN AND DATE BELOW.

_____ I hereby certify that the information provided by me to the company in this application and in the hiring process is true and complete. I understand that any omission or misstatement of material fact by me will justify rejecting my application and will also justify dismissing me if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the company to investigate my references, work record, education, and other matters related to my suitability for employment, and further authorize the references I have listed to disclose to the company any information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons from any claim arising out of or in any way related to any such investigation or disclosure.

_____ In consideration for the processing of this application, I agree to submit to binding arbitration all claims arising out of the submission of this application. In consideration of any decision to hire me, I agree that all disputes that cannot be resolved by company, or the termination thereof will be submitted to binding arbitration conducted under the rules of the American Arbitration Association and the company policy and procedures then in effect.

_____ I understand and agree that nothing done or stated in this application, in any job interview, or during my employment is intended to create a contract of continued employment with the company. Employment with the company is at will, terminable with or without prior notice and with or without cause. No thing in the company policies, procedures, or practices is to be construed as a promise of continued employment. No representation inconsistent with employment at will is binding on the company unless made in writing and signed by me and the company's president.

Applicant's Signature

_____/_____/_____
Date