



1010 4TH ST.
DURANT, IA 52747

PHONE: 563-785-4461
FAX: 563-785-4463

Job Application

Personal Information

Last	First	MI	SSN#	Email		
Street Address		City	ST	Zip	Home Phone	Mobile Phone
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, Date of Birth	
Have you been convicted of a felony or been incarcerated in connection with a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please explain:			
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No	Branch		Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No		War	
What position are you applying for?			How did you hear about this position?			
Expected Hourly Rate	Expected Weekly Earnings		Date Available			

Prior Work Experience

	Current or Most Recent		Prior		Prior	
Employer						
Address						
City, ST, ZIP						
Telephone						
Name of Immediate Supervisor						
Dates of Employment	From	To	From	To	From	To
Position/Job Title						
Pay						
Reason for Leaving						
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Education

	Name/Location	Last Year Complete	Degree	Major or Emphasis
High School		9 10 11 12		
College/University		1 2 3 4		
Trade School				
Other				
List any applicable special skills, training or proficiencies.				

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.	Signature	Date
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I have answered all the questions on this application honestly and to the best of my ability. I understand that any false or misleading answers will result in disqualification for potential employment at Russelloy Iron Foundry LLC.

I acknowledge that my employment with Russelloy Foundry is contingent upon passing for a post offer physical, pulmonary function test, auditory tests, and drug screening. If I do not show up to the appointment given to me and do not call Russelloy Foundry to make other arrangements, I am declining employment.

Also if I do not stay for my probationary period (90 days) I am allowing Russelloy to deduct the cost of my physical, drug screen, and boots from my final check.

Signature _____

Date _____