

Michigan Commercial Door Group

23010 Industrial Drive E., St. Clair Shores, MI. 48080

Phone: (800)826-3667 Fax 248-629-1628

Employment Application

Applicant Information											
Full Name:						Date:					
<i>Last</i>			<i>First</i>			<i>M.I.</i>					
Address:											
<i>Street Address</i>						<i>Apartment/Unit #</i>					
<i>City</i>						<i>State</i>		<i>ZIP Code</i>			
Phone:		()			E-mail Address:						
Date Available:					Social Security No.:				Desired Salary:	\$	
Position Applied for:											
Are you a citizen of the United States?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?					
Have you ever been convicted of a felony?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain:					
Do you have any work restrictions?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain:					

Education									
High School:				Address:					
From:		To:		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	
College:				Address:					
From:		To:		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	
Other:				Address:					
From:		To:		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	

References									
<i>Please list three professional references.</i>									
Full Name:				Relationship:					
Company:				Phone: ()					
Address:									
Full Name:				Relationship:					
Company:				Phone: ()					
Address:									
Full Name:				Relationship:					
Company:				Phone: ()					

Address:					
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Previous Employment

Company:				Phone:	()
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Address:				Supervisor:	
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Job Title:			Starting Salary:	\$	Ending Salary:	\$
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Responsibilities:					
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From:		To:		Reason for Leaving:	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
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Company:				Phone:	()
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Address:				Supervisor:	
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Job Title:			Starting Salary:	\$	Ending Salary:	\$
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Responsibilities:					
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From:		To:		Reason for Leaving:	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
--	---------------------------------	--------------------------------	--	--	--

Company:				Phone:	()
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Address:				Supervisor:	
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Job Title:			Starting Salary:	\$	Ending Salary:	\$
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Responsibilities:					
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From:		To:		Reason for Leaving:	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
--	---------------------------------	--------------------------------	--	--	--

Company:				Phone:	()
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Address:				Supervisor:	
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Job Title:			Starting Salary:	\$	Ending Salary:	\$
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Responsibilities:					
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From:		To:		Reason for Leaving:	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
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Military Service

Branch:				From:		To:	
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Rank at Discharge:			Type of Discharge:			
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If other than honorable, explain:					
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Disclaimer and Signature

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:				Date:	
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