



AME Swiss Machining, LLC.
Employment Application

APPLICANT INFORMATION

Last Name				First			M.I.	Date			
Street Address							Apartment/Unit #				
City				State			ZIP				
Phone				E-mail Address							
Date Available			Last 4 digits of SSN:	XXX-XX-_____	Desired Salary						
Position Applying 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 so, when?								
Have you ever been convicted of a felony that has not been expunged?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain								

EDUCATION

High School				City & State						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>						
College				City & State						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
Other				City & State						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					

REFERENCES

Please list three professional references.

Full Name				Relationship						
Company, City & State						Phone				
Full Name				Relationship						
Company, City & State						Phone				
Full Name				Relationship						
Company, City & State						Phone				

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

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.	
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

***Sign with Electronic Signature OR Save, Print, Sign and Scan. All completed applications can be emailed to: hrpayroll@ameswiss.com (or hard copies can be mailed to the address at the top of page 1)**