



Bulldog Battery

Proud to be 100% Employee-Owned!

98 E Canal Street
PO Box 766
Wabash, IN 46992



bulldog-battery.com



(800) 443-3492



(260) 563-8245

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

First Name	Last Name	Position Applying For:	Today's Date (Date of Application):	
Address (Number, Street Name, Apt. Number):		City:	State:	Zip Code:
Cell Phone:	Alternate Phone (if any):	Email Address:		

In case of emergency, notify:

	Name	Relationship	Contact Number
Primary			
Secondary			

GENERAL INFORMATION

Are you at least 18 years old and legally eligible to work in the United States?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have reliable transportation to travel to work?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to take a drug test?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any friends or relatives that work here? If yes, please list:		<input type="checkbox"/> Yes <input type="checkbox"/> No
How did you hear about this position?		
<input type="checkbox"/> Indeed.com <input type="checkbox"/> ZipRecruiter.com <input type="checkbox"/> Other (Please list): _____ <input type="checkbox"/> Walk In <input type="checkbox"/> The Paper <input type="checkbox"/> Referral (Please list name): _____		
Please check all shifts you are available for work:		<input type="checkbox"/> 1 st Shift (Mon – Fri) <input type="checkbox"/> Weekends <input type="checkbox"/> Flexible Day/Night Shift
Please check all appropriate schedules:		<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Overtime <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun
Date available to start work?		Desired Rate of Pay?

EDUCATION

Level	School Name	Period		Degree Received?
		From	To	
High School/GED				
College/University/Other				

WORK REFERENCES

Name	Company	Title	Contact Information





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WORK EXPERIENCE

Employer's Name, Address, Telephone	Start Pay	Job Title
	Last Pay	Reason for Leaving
Describe the work you performed.		Supervisor Name
Employer's Name, Address, Telephone	Start Pay	Job Title
	Last Pay	Reason for Leaving
Describe the work you performed.		Supervisor Name
Employer's Name, Address, Telephone	Start Pay	Job Title
	Last Pay	Reason for Leaving
Describe the work you performed.		Supervisor Name

SIGNATURE (Please Read Before Signing)

I certify that the information provided above is true and correct to the best of my knowledge. I understand that, if employed, falsified statements on this application for employment will be considered grounds for termination.

I authorize the company to thoroughly investigate my work experience and any other matters related to my suitability for employment. I further authorize my former employers to disclose to Bulldog Battery Corporation any and all information they may have concerning my previous employment. In addition, I hereby release Bulldog Battery Corporation, my former employers (as listed above), and all other persons from any and all claims, demands, or liabilities arising out of, or in any way related to, such disclosure.

I acknowledge that, if employed, both the company and I have the right to terminate the employment relationship at any time, with or without cause or advance notice. This employment at-will relationship will remain in effect throughout my employment with Bulldog Battery Corporation and may not be modified by any oral or implied agreement.

Employee Signature:	Date:
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