



www.dstewart.com
 2402 Advance Road
 Madison, WI 53718-6737

Employment Application

Use Adobe Reader to Complete & Return This Form.
 Use Adobe Acrobat if you want to save data.

Confidential HR Contact Info:
 Email: dschr@dstewart.com
 Fax: 608.223.6412

This application form was designed for use by persons applying for various types of positions. Please answer to the best of your ability. The Douglas Stewart Company complies with the Immigration and Reform Control Act of 1986. Proof of citizenship or authorization for employment in the United States is a requirement before final selection. All information will be treated confidentially.

EQUAL OPPORTUNITY EMPLOYER

The Douglas Stewart Company believes that all persons are entitled to equal employment opportunities, and does not discriminate against its employees, or applicants for employment, because of sex, race, religion, color, national origin or ancestry, age, handicap, marital status, source of income, arrest or conviction record, less than honorable discharge, physical appearance, sexual orientation, political beliefs, status as a student, membership in the military, national guard or reserves or other protected status, provided they are qualified and meet the requirements established for the job.

Date _____(m-d-yyyy)

Name _____(First, Middle Initial , Last)

Address _____

Phone# (Home) _____ (Work) _____ Email _____

PERSON TO CONTACT IN THE EVENT OF AN EMERGENCY:

Name _____

Address _____

Phone# _____

In Order to Perform a Complete Check of your Educational Record or Work History, is there any Additional Information Necessary about your Name (I.E., Change of Name, Assumed Name, Nickname) we should be aware of? No Yes

If "Yes," Please Explain: _____

Position(s) Applied for _____

How were you Referred to this Company? _____

Pay Range Expected _____ Hour Week Month Date Available _____(m-d-yyyy)

Have you Applied here before? Yes No Date _____(m-d-yyyy)

Have you been Employed by DSC before? Yes No Date _____(m-d-yyyy)

If you are Applying for Summer Employment, at what Date will you No Longer be Available? _____(m-d-yyyy)

Are you Available to Work ANY day of the Week and ALL Requested Overtime? Yes No

If No, Explain: _____

Are you Legally Eligible for Employment in the U.S.? Yes No If Hired, can you Furnish Proof of Age? Yes No

We use E-Verify to validate employment eligibility.

EDUCATION AND TRAINING

High School Name _____ High School Address _____

Did You Graduate? Yes No

College Name _____ College Address _____

Did You Graduate? Yes No

Business, Vocational or Technical School _____ School Address _____

Did You Graduate? Yes No

Skill Type _____ Skill Description _____

Skill Level _____ Skill Experience _____

Date Expires _____

EMPLOYMENT EXPERIENCE

List Each Job Held. Start With Present Or Most Recent Employment. Include Military AND Volunteer Assignments.
Application Not Valid if this Section is Incomplete. Fill in All Requested Information and DO NOT write Refer to Resume.

1 Employer _____ Address _____
Phone# _____ Job Title _____ Supervisor _____
Duties/Responsibilities _____
Reason for Leaving _____
Dates Employed: From _____ To _____ Salary/ Hourly Rate: Start _____ End _____
May we Contact? Yes No

2 Employer _____ Address _____
Phone# _____ Job Title _____ Supervisor _____
Duties/Responsibilities _____
Reason for Leaving _____
Dates Employed: From _____ To _____ Salary/ Hourly Rate: Start _____ End _____
May we Contact? Yes No

3 Employer _____ Address _____
Phone# _____ Job Title _____ Supervisor _____
Duties/Responsibilities _____
Reason for Leaving _____
Dates Employed: From _____ To _____ Salary/ Hourly Rate: Start _____ End _____
May we Contact? Yes No

4 Employer _____ Address _____
Phone# _____ Job Title _____ Supervisor _____
Duties/Responsibilities _____
Reason for Leaving _____
Dates Employed: From _____ To _____ Salary/ Hourly Rate: Start _____ End _____
May we Contact? Yes No

ADDITIONAL QUESTIONS

Have you ever been Discharged from a Job? Yes No
If "Yes", State the Employer and the Reason:

Have you ever Resigned from a Job rather than face discharge? Yes No
If "Yes", State the Employer and the Reason:

Have you ever been Convicted of a Crime? Yes No
If "Yes", state the Crime and Date of Conviction:

Are any accommodations required for you to be able to perform the ESSENTIAL FUNCTIONS of the job? Yes No
If "Yes", Please Identify:

Have you served in the U.S. Armed Forces? Yes No
If yes, what Branch: _____

Are you fluent in reading, writing, or speaking any language other than English? Yes No
If yes, which Language? _____ Reading Writing Speaking

Describe Special Training, Skills and Activities which relate to the Job for which you are Applying AND Explain why you want to work at The Douglas Stewart Company, Inc.

Please list two references other than previous employers or family.

Name _____ Address _____
Phone _____ Occupation _____ Years Known _____

Name _____ Address _____
Phone _____ Occupation _____ Years Known _____

Please Read

Depending on the position you are applying for and as part of our procedure for processing your employment application, various types of investigative reports may be requested. These reports may include a criminal or credit background or other reports relating to the position for which you are applying. Please read and sign the authorization below.

I hereby authorize a previous employer to release to the Douglas Stewart Company, and the Douglas Stewart Company to receive, any and all information concerning my past work history, including disciplinary records, to be used in connection with consideration of any application for employment. I also waive all statutory rights under any state or federal law and any private causes of actions whatsoever which otherwise may be available to protect the release, receipt and/or consideration of such information, including any right to notification of release from any previous employer. I also agree to provide information if requested. You have the right to make a written request, within a reasonable period of time, for disclosure of the nature and scope of the information contained in the report.

I understand that I am an employee at will and that my employment and compensation may be terminated with or without cause, and with or without notice, at any time, at the option of either the company or myself. I understand that no representative of the Douglas Stewart Company, other than the president, has authority to enter into any oral or written agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. I also understand that if I accept an offer for employment, I agree to comply with all company policies and procedures. These policies are subject to change without prior notification, and I am subject to policy changes as they are made.

I certify that my answers given in this application are true and complete to the best of my knowledge. Any intentional misstatement of facts will be sufficient reason for immediate withdrawal of this application or, in the event of employment, be deemed cause for dismissal.

Authorization void after ninety (90) days.

I have read and understand the above statement.

Print Your Full Name Here _____

Applicant's Signature _____ Date _____ (m-d-yyyy)