



4085 North 128th Street, Brookfield, WI 53005
 phone 262.781.1500 · fax 262.781.1540
 www.LembergElectric.com

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, gender, national origin, gender identity, disability, age, marital status, protected Veteran status, creed, status with regard to public assistance, sexual orientation or any other protected category under applicable state/federal law. Applicants of diverse backgrounds are encouraged to apply

Please COMPLETE the application by answering each question fully.

Applicant Information

Last Name	First	MI
Email address		Date
Address		Primary Telephone ()
City	State	ZIP
		Alternate Telephone ()
Are you legally authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever applied to this company? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever worked for this company <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, when:
Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted. (Convictions are not an automatic bar to employment.)		
Do you have any pending criminal charges against you? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, describe the 1) nature of charges, 2) date issued, and 3) county and state where issued.		

Position You are Applying For

Position Title:	
When can you start?	Salary Desired:
If you were referred to Lemberg by an employee please provide their name:	
How did you hear about this position?	
Are you seeking: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary	
Can you perform the essential functions of this job with or without accommodations? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Education

	Name and Location (city, state)	Degree/Diploma/Certificate	Completed Degree
High School		<input type="checkbox"/> High School Diploma	<input type="checkbox"/> Yes
		or <input type="checkbox"/> GED	<input type="checkbox"/> No
Technical/Trade			<input type="checkbox"/> Yes
			<input type="checkbox"/> No
College/University			<input type="checkbox"/> Yes
			<input type="checkbox"/> No
Other (specify)			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

Certifications

Course/Seminar	Organization Sponsoring	Completed (list date if applicable)	Content
OSHA 10	OSHA	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
OSHA 30	OSHA	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A

Special Skills

List any special skills that related to the job for which you are applying for:

Employment

Are you presently employed? Yes No May we contact your present employer? Yes No

Have you ever been fired or asked to resign from a job? Yes No

If yes, please explain:

Employment	
Company	Telephone ()
Address	
Job Title	Employment Dates (month and year) From To
Name of Immediate Supervisor	
Responsibilities	
Salary — start Salary — end	Reason for Leaving
May we contact your supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Company	Telephone ()
Address	
Job Title	Employment Dates (month and year) From To
Name of Immediate Supervisor	
Responsibilities	
Salary — start Salary — end	Reason for Leaving
May we contact your supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Company	Telephone ()
Address	
Job Title	Employment Dates (month and year) From To
Name of Immediate Supervisor	
Responsibilities	
Salary — start Salary — end	Reason for Leaving
May we contact your supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employment References

List individuals familiar with your job qualifications (no relatives or personal friends).

Name	Email Address
Relationship	Telephone
Company	
Address	

Name	Email Address
Relationship	Telephone
Company	
Address	

Name	Email Address
Relationship	Telephone
Company	
Address	

Affidavit, Consent and Release**Please Read Carefully Before Signing This Form**

- I certify that all information contained in this application is true and correct to the best of my knowledge and belief. I understand that any false information or omissions may disqualify me from further consideration or may result in my dismissal if discovered at a later date.
- I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer or previous employer, and organizations to provide relevant information and opinion that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.
- If a job offer is made by the company, I agree that a post-offer, pre-employment physical examination, fit for duty test and drug screening may be required as a condition of my employment. I understand that an offer of employment is conditioned upon the results of said being satisfactory to the company.
- I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without cause and with or without notice.

Signature	Date
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APPLICANT SELF IDENTIFICATION FORM

REQUIRED INFORMATION:

NAME: _____

Date: _____

JOB APPLIED FOR: _____

VOLUNTARY INFORMATION:

This Company is subject to certain governmental recordkeeping and reporting requirement for the administration of civil rights laws and regulations. In order to comply with these laws, the employer invites applicants to voluntarily self-identify gender and race/or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and only used in accordance with the provisions of applicable laws, executive orders and regulations including those that require the information to be summarized and reported to the federal government. When reported, data will not identify any specific individual.

GENDER:

(Please check one of the options below)

<input type="checkbox"/>	Male
<input type="checkbox"/>	Female
<input type="checkbox"/>	Decline to answer

RACE/ETHNICITY:

(Please check one of the descriptions below corresponding to the ethnic group with which you identify.)

<input type="checkbox"/>	Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
<input type="checkbox"/>	White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
<input type="checkbox"/>	Black or African American (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa.
<input type="checkbox"/>	Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.
<input type="checkbox"/>	Asian (Not Hispanic or Latino): A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
<input type="checkbox"/>	American Indian or Alaska Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
<input type="checkbox"/>	Two or more races (Not Hispanic or Latino): All persons who identify with more than one of the above five races.
<input type="checkbox"/>	Decline to answer

This Company does not discriminate on the basis of race, color, religion, gender, national origin, gender identity, disability, age, marital status, protected Veteran status, creed, status with regard to public assistance, sexual orientation or any other protected category under applicable state/federal law.

- Confidential Information – Return to Human Resources Department -