



Application for Employment



All applicants are considered for positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or disability. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications. We appreciate your interest in our organization and assure you that we will give this application the utmost consideration.

Applicants may request an accommodation needed to allow them to complete the application process. This application will remain under active consideration for 90 days.

Name _____ Date _____

Source _____

An Equal Employment Opportunity Employer

omega.com | info@omega.com

To gain our fullest consideration for employment possibilities, please complete this application in detail, as indicated. If any information is missing, your application may be rejected.

Date _____

Name _____ E-mail _____
Last First Middle

Present address _____ Telephone No. _____
No. Street City State Zip

Permanent address _____ Alternative Telephone No. _____

Type of work desired _____

Are you seeking Full-Time or Part-Time employment? 1st Shift 2nd Shift Weekend

Specify days and hours if part-time _____

Expected rate of pay _____ Date available _____

Company: <input type="checkbox"/> OMEGA Engineering <input type="checkbox"/> Omegadyne <input type="checkbox"/> Newport Electronics

Referral Source (Please Specify) Advertisement _____ Company Employee _____
 Other _____

Please list any relatives working for the Company _____

Please list any friends working for the Company (optional) _____

Were you previously employed by the Company? Yes No If yes, when? _____

Have you ever applied for employment at the Company? Yes No If yes, when? _____

Do you have a legal right to work in the United States? _____

Are you currently on lay-off and subject to recall? _____

In the event your position requires travel, do you have a valid driver's license? Yes No

Are you currently employed? Yes No

May we contact your current employer? _____

Record of Education *(Degrees will be verified)*

Name and Location of High School, Trade or Business School, Colleges Attended and/or Graduate Programs		Course of Study	Did You Graduate? (If Not, How Many Years Completed?)	Graduation Date (optional)	Grade Point Average (1) Overall (2) Major	Highest Degree Earned or Expected
1					1	
					2	
2					1	
					2	
3					1	
					2	

Do you anticipate continuing your education? (please comment) _____

List Scholarships, Scholastic Honors, College Activities, Associations, etc. _____

Have you ever been convicted of a criminal offense? (Felony or misdemeanor) _____

Yes _____ No _____ If yes, please provide explanation _____

Military Service Record

Present Selective Service Status	Military Duty Branch	From	To
Previous Service Branch	From	To	Rank
		Experience	

List in Order Beginning with Most Recent Employer

Present and Past Employment

(Employment experience will be verified.)

From Mo/Yr	To Mo/Yr	Company Name	Address & Phone
Type of Company, Products, Services, etc.			Reason for Leaving
Job Title		Supervisor's Name & Title	Annual Base Salary \$
Duties in Brief			

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Do you currently hold a second job? Yes No

Please Comment _____

Special Skills, Certifications and Outside Activities

Describe any special skills, including Total Quality Management (TQM), related or unrelated to the job you are seeking.

Professional Memberships, Certificates, and or Licenses held, and Patents and/or Inventions (if applicable).

Extra-Curricular Activities, Hobbies, etc.

I certify that the answers provided above are accurate to the best of my knowledge and belief. I am aware that failure to complete this application, intentional omissions or misstatements may result in refusal of employment or subsequent discharge.

It is also understood that:

- "The Company" follows an "employment at will" policy, in that I, or "the Company" may terminate my employment at any time, or for any reason consistent with applicable state or federal laws.
- This application is not in itself a contract of any kind and no oral or other promise has been made to me during the application process that is binding on "the Company" unless in writing and signed by an officer of "the Company."
- I will be required to pass a background check, pre-employment physical, including a drug and alcohol screening, at "the Company's" expense and authorize a copy of the results of said physical to be released to "the Company."
- "The Company" is a smoke free environment. Smoking is not allowed in any Company building.
- I must produce proof that I have a legal right to work in the United States.

Signature of Applicant

Date

For Human Resources Department Use Only

Interviewer

1. _____
2. _____
3. _____

Date/Time

1. _____
2. _____
3. _____

Final Disposition _____

Employment Date _____

Position _____

Work Location _____

Supervisor _____

Rate/Hr _____

Hrs/Day _____

Hrs/Week _____

