Klein Products of Texas

16576 Hwy 79 E | Jacksonville, Texas 75766
Phone: (903) 589-4546 | Fax: (903) 589-4545

Fill out application completely. If questions are not applicable, enter "NA". ***Do not leave questions blank.*** *Application must be signed when completed.* ***We are an Equal Opportunity Employer and do not discriminate based on race, color, national origin, sex, religion, age or disability in employment. Resumes will not be accepted in lieu of applications.***

(PLEASE PRINT)

Last Name	**First Name**	**Middle Name**	**Date**

Street Address	**City**	**State**	**Zip**	**Telephone**

Position Applied for:	**How did you learn about us?** ☐ Advertisement ☐ Friend ☐ Employment Agency ☐ Relative ☐ Other _____ If referred by current employee, please indicate by giving name of employee above
Best Time to contact you: _____ (AM or PM) _____ (Phone Number) Date available for work: _____/_____/_____	**Shift available to work:** ☐ Full time (Please indicate 1st or 2nd shift) ☐ Part time (Please indicate Mornings/Afternoons/Evenings) ☐ Temporary (Please indicate dates available __/__/ - __/__/ What is your desired salary range? _____

Have you ever filed an application with us before? ☐ Yes ☐ No If yes, give date:

Have you ever been employed with us before? ☐ Yes ☐ No If yes, give date:

Do any of your friends or relatives, other than spouse work here? ☐ Yes ☐ No
If yes, state name, relationship and location: _____

Are you currently employed? ☐ Yes ☐ No If yes, may we contact your present employer? ☐ Yes ☐ No

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

Have you ever been convicted of a felony or subjected to deferred adjudication on a felony charge? ☐ Yes ☐ No
If yes, please explain: _____

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied as posted with our company? ☐ Yes ☐ No

Personal/Professional References (Do not include family members)

Name	Phone Number	Best time to call	Occupation
1.			
2.			
3.			

We are an Equal Opportunity Employer We are a Drug Free Employer

WORK EXPERIENCE

Start with your present of last job. Indicate any job-related military service assignments or volunteer activities. You may exclude organizations which indicate race, color, religion, gender, nation origin, disabilities or other protected status.

Employer:	Dates Employed: From _____ To _____	Work Performed:
Address:		
Telephone Number(s):	Hourly Rate/Salary: Starting_____ Final _____	
Starting Present Job Title: _____		
Supervisor: _____		
Reason for leaving: _____		

Employer:	Dates Employed: From _____ To _____	Work Performed:
Address:		
Telephone Number(s):	Hourly Rate/Salary: Starting_____ Final _____	
Starting Present Job Title: _____		
Supervisor: _____		
Reason for leaving: _____		

Employer:	Dates Employed: From _____ To _____	Work Performed:
Address:		
Telephone Number(s):	Hourly Rate/Salary: Starting_____ Final _____	
Starting Present Job Title: _____		
Supervisor: _____		
Reason for leaving: _____		

P.O. Box 2066 | Jacksonville, TX | USA-75766 • **Phone:** 903.589.4546 | 888.589.4546 • info@kleinproducts.com

Include explanation of any gaps in employment:

EDUCATION

School	Name and Address Of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

SPECIALIZED SKILLS (Skills/Equipment operated)

_____Terminal	**_____ Spreadsheet**	**Production/Mobile Machinery (e.g. Forklift, etc.,**	**Other (List):**
_____ PC/Mac	**_____ Word Processing**		
_____ Keyboard	**_____ Shorthand**		
_____ WPM	**_____ WPM**		

State any additional information your feel may be helpful to use in considering your application:

ADDITIONAL INFORMATION

Describe any specialized training, apprenticeship, skills and extra-curricular activities:

Describe any job related training received in the US Military:

P.O. Box 2066 | Jacksonville, TX | USA-75766 • **Phone:** 903.589.4546 | 888.589.4546 • info@kleinproducts.com

List professional, trade, busines or civic activities and offices held:
(You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.)

Please read the following statements carefully and indicate your understanding and acceptance by signing in the space provided:

1. I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission or information may be grounds for refusal to hire or, if hired, termination.

2. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the United States.

3. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you.

_____ _____

Applicant Signature **Date**

This application must be signed.

P.O. Box 2066 | Jacksonville, TX | USA-75766 • **Phone:** 903.589.4546 | 888.589.4546 • info@kleinproducts.com

APPLICANT EEO DATA FORM

The information requested is optional and is being collected for the purpose of reporting to Federal and Equal Employment Opportunity Agencies and will not be considered as part of the application for employment. It will be separated from the application.

1. Job Posting Number			**2.** Last Name (Type or Print)_____ First Name _____ Middle Name: _____		
3. Address	City	State	Zip	**4**. Daytime Phone ( )	**5.** Work Phone ( )
6. Sex ☐ Male ☐ Female	**7**. Birthday	**8.** Ethnic Origin ☐ **W** - White ☐ **B** - Black ☐ **H** - Hispanic ☐ **P** – Asian Pac. Islander ☐ **I** – Am. Ind. Alaskan ☐ **O**- Other			
9. Veteran ☐ Yes ☐ No	**10.** Surviving Spouse of Veteran who has not remarried ☐ Yes ☐ No	**11.** Orphan of Veteran ☐ Yes ☐ No	**12.** Former Texas Foster Youth 25 yrs. of age or younger ☐ Yes ☐ No		

13. How did you first find out about this job?

☐ **01 -** Other Klein Employee	☐ **06** - Newspaper	☐ **11 -** WorkinTexas.com
☐ **02 –** Job Fair	☐ **07** – College/University Career	☐ **12 –** Other (Specify)
☐ **03** – Professional Publication	☐ **08** – Human Resources/Personnel Office	
☐ **04 –** Recruitment Poster	☐ **09** - Radio	
☐ **05** - Television	☐ **10 –** Agency Website - Internet	

X_____

Signature of Applicant

White (Not of Hispanic origin) – All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
Black (Not of Hispanic origin) – All persons having origins in any of the Black racial groups of Africa.
Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
Asian or Pacific Islander – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
American Indian or Alaskan Native – All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

AN EQUAL OPPORTUNITY EMPLOYER

P.O. Box 2066 | Jacksonville, TX | USA-75766 • **Phone:** 903.589.4546 | 888.589.4546 • info@kleinproducts.com

AUTHORIZATION FOR PRIOR EMPLOYER/CRIMINAL BACKGROUND CHECKS

Name: _____

Social Security Number: _____

I, _____, hereby authorize any investigator or duly accredited representative of Klein Products of Texas, Inc. bearing this release to obtain any information from schools, residential management agents, employers, criminal justice agencies, or individuals, relating to my activities. This information may include, but is not limited to, academic, residential, achievement, performance, attendance, personal history, disciplinary, arrest, and conviction records. I hereby direct you to release such information upon request of the bearer. I understand that the information released is for official use by Klein Products of Texas, Inc. and may be disclosed to such third parties as necessary in the fulfillment of official responsibilities.

I hereby release any individual, including record custodians, from any and all liability for damages of whatever kind or nature which may at any time result to me on account of compliance, or any attempts to comply, with this authorization.

_____
Applicant's Signature

_____
Date

P.O. Box 3700 | Ontario, CA | USA-91761 • **Phone:** 909.460.4546 | 800.646.4546 • info@kleinproducts.com
P.O. Box 2066 | Jacksonville, TX | USA-75766 • **Phone:** 903.589.4546 | 888.589.4546 • info@kleinproducts.com