



Innovation in Manufacturing Since 1967

EMPLOYMENT APPLICATION

Personal Information

Full Name (Last, First, MI):	Other Names Used:
Current Address, City, State, ZIP:	Referred By:
Email Address:	Phone Number(s):
Position(s) applied for:	When can you start employment?
Interested In (Check all that apply): <input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> Temporary <input type="checkbox"/> Days <input type="checkbox"/> Nights <input type="checkbox"/> Weekends	
Have you ever worked for Voss Manufacturing before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, When?

Employment History (or attach Resume)

Start with your current or most recent position

Employer Name	Job Title	From Month/Yr	To Month/Yr
Street Address, State, Zip		Reason for Leaving	
Describe Work Performed			

Employer Name	Job Title	From Month/Yr	To Month/Yr
Street Address, State, Zip		Reason for Leaving	
Describe Work Performed			

Employer Name	Job Title	From Month/Yr	To Month/Yr
Street Address, State, Zip		Reason for Leaving	
Describe Work Performed			

Education

Start with your current or most recent education

Type: High School/GED	Name:	Major/Subject:	Degree/Certificate Earned:
College/University <input type="checkbox"/> Trade School <input type="checkbox"/>			
College/University <input type="checkbox"/> Trade School <input type="checkbox"/>			



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Eligibility & Authorization

Are you legally authorized to work in the U.S.?

☐ Yes ☐ No

Are you physically able to perform the job duties required for this role(s)?

☐ Yes ☐ No

Will you require visa sponsorship now or in the future?

☐ Yes ☐ No

(If under 18) Can you provide a valid work permit?

☐ Yes ☐ No ☐ N/A

Personal/Professional References (other than previously listed, no relatives)

Name	Business/Position/Occupation	Relation to Applicant
Contact Information (phone number and email)		Years Known:

Name	Business/Position/Occupation	Relation to Applicant
Contact Information (phone number and email)		Years Known:

Name	Business/Position/Occupation	Relation to Applicant
Contact Information (phone number and email)		Years Known:

Authorization & Signature

I certify that all information provided in this employment application is true and complete to the best of my knowledge. I understand that any false statements or omissions may disqualify me from employment or result in my dismissal.



I authorize Voss Manufacturing, Inc. to investigate my background, including my employment history, education, and any other relevant information necessary to make an employment decision. I release all parties from any liability for any damage that may result from furnishing such information.

Applicant Signature

Date

Voss Manufacturing, Inc. is an Equal Opportunity Employer and committed to providing a workplace free from discrimination and harassment. We consider all applicants for employment without regard to race, color, religion, sex, sexual orientation, gender identity or expression, national origin, age, disability, genetic information, veteran status, marital status, domestic violence victim status, or any other legally protected status under applicable federal, state, or local law. We believe in creating a diverse and inclusive work environment where everyone is treated with respect and dignity.



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