



International Association of Machinists and Aerospace Workers

9000 Machinists Place
Upper Marlboro, MD 20772
(301) 967-4500

Application for Employment

IAMAW is an equal opportunity employer. It is our policy to provide equal opportunities in employment, promotion, wages, benefits and all other privileges, terms and conditions of employment to qualified persons without regard to race, religion, color, creed, ancestry, national origin, sex, age, genetic information, veteran's status or disability which does not interfere with the ability to perform the essential functions of an employee's job with or without reasonable accommodation.

Application Date:

Position:

Revised Date:

Personal Information

Last Name	First Name	MI	Have you ever worked under a different name? If so, please provide name(s).
Street Address			
City	State	Zip Code	Home Phone
Mailing Address <i>(If different than Street Address)</i>			Business Phone
Email Address			
Have you ever applied for employment with us? If yes, month and year			Expected Pay
Are you legally eligible for employment in the United States?			When will you be able to begin work?
How did you learn of our organization?			

Education

School	Name and Location of School	Major, If Any	Number of Years Completed	Graduated?	Degree or Diploma
High School or Equivalent					
College/ University					
Other					



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Employment

List all employment starting with your most recent position. Please use additional application pages as necessary.

Business Name or Employer	Telephone
Address	Employed (month and year) From _____ To _____
Name of Supervisor	Weekly Pay Start _____ Last _____
May we contact this Employer?	If no, why?
Job Title and Description	
Reason for Leaving	

Business Name or Employer	Telephone
Address	Employed (month and year) From _____ To _____
Name of Supervisor	Weekly Pay Start _____ Last _____
May we contact this Employer?	If no, why?
Job Title and Description	
Reason for Leaving	

Business Name or Employer	Telephone
Address	Employed (month and year) From _____ To _____
Name of Supervisor	Weekly Pay Start _____ Last _____
May we contact this Employer?	If no, why?
Job Title and Description	
Reason for Leaving	

Please explain any gaps in employment longer than one month.
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Other Information

Do you have any special skills that you consider relevant to the performance of this job?

If employed by the International Association of Machinists and Aerospace Workers, what would be your objective?

Have you ever been discharged from employment?

If yes, please explain in detail.

Have you ever been convicted of a felony?

If yes, explain in detail, including the date(s) of the conviction(s), except for those convictions that have been sealed, expunged, or statutorily eradicated.

A conviction record is not an automatic bar to employment and the nature, recency and disposition of an offense will be considered. Any convictions will only be considered insofar as they are relevant to the particular position(s) for which you applied.

If applicable, give name(s) of relatives and/or friends working for the IAMAW?



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References

Professional References

Name	Title
Company	
Business Address	
Business Phone	Email Address

Name	Title
Company	
Business Address	
Business Phone	Email Address

Name	Title
Company	
Business Address	
Business Phone	Email Address

Personal References

Name	
Address	
Phone	Email Address

Name	
Address	
Phone	Email Address

Name	
Address	
Phone	Email Address



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Applicant's Statement

NOTICE TO APPLICANT: Any individual who, because of a disability, needs accommodations or assistance in completing this application or at any time during the application process, should contact the Human Resources Department.

APPLICATION INFORMATION

1. The purpose of the employment application form is to provide you with the opportunity to describe your experience, skills, abilities and other personal attributes which would make you eligible to be considered for the position indicated. Please complete the entire application. If any pertinent questions are not answered, this application will be rejected. This application must be signed in order to be accepted. Your application will only be considered for this position.
2. Your application will be kept under active consideration for ninety (90) days.
3. All new employees are required to comply with the employment verification requirements of the Immigration Reform and Control Act. This means that if you are hired, you will be required, within three days of starting work, to provide documents proving your identity and authorization to work in the United States.
4. I understand that if I am offered a position and accept employment with IAMAW, I may be covered by a collective bargaining agreement (CBA). If my position is not subject to a CBA, I understand that my employment is entirely at will, for no specified term. I also understand that this employment application is not a contract of employment, and that if hired I may voluntarily resign employment and may be terminated by IAMAW at any time and for any reason, unless my employment is subject to the terms of a CBA. My failure to provide proper notice of resignation may result in my forfeiting of certain accrued benefits. I further understand that no representative of IAMAW has authority to enter into any written or oral agreement or contract for employment for any specified period of time, or to make any written or oral agreement that contradicts this paragraph, except the IAM's Human Resources Director, provided that it is both written and executed.
5. I hereby acknowledge that I have read and understand this statement and will abide by its terms. I understand that my application will be considered active for ninety (90) days from the date of receipt.
6. I give permission to IAMAW to investigate any and all information concerning my application in order to determine its accuracy. This includes, but is not limited to, criminal background checks, credit history check, employment and personal reference requests and verification of educational or certification credentials. I understand that if I misrepresent facts or omit material facts in my application, it may be cause for my rejection or dismissal from employment.

Print Full Name:

Signature

Date

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR, POLYGRAPH, OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100. I have read and understand the above statement.

Print Full Name:

Signature

Date