



**Moline Machinery LLC**  
 PO Box 16308  
 Duluth, MN 55816-0308

**Application for Employment**  
 Our organization is an Equal Opportunity Employer and does not discriminate against any individual in any phase of employment in accordance with requirements of local, state and federal laws.

Date: \_\_\_\_\_

**PERSONAL INFORMATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Current Mailing Address: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Main Telephone Number: (    ) \_\_\_\_\_ Alternative Telephone Number: (    ) \_\_\_\_\_

**EMPLOYMENT INFORMATION**

If hired, are you able to submit verification of your legal right to work in the United States?    Yes     No

Position Desired \_\_\_\_\_ Second Choice \_\_\_\_\_  
 Available Start Date \_\_\_\_\_ Salary Expectation \_\_\_\_\_

Do you desire:    Full Time     Part Time

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation?    Yes     No

**How did you hear about the position?**

**EMPLOYMENT EXPERIENCE**

List the names and addresses of previous employers during the last five years. Begin with your most current employer.

<b>1. Employer</b>		Dates Employed		Work Performed
Address		From	To	
Telephone number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				
<b>2. Employer</b>		Dates Employed		Work Performed
Address		From	To	
Telephone number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				
<b>3. Employer</b>		Dates Employed		Work Performed
Address		From	To	
Telephone number(s)		Hourly Rate/ Salary		

Job Title	Supervisor	Starting	Final	
Reason for Leaving				
<b>4. Employer</b>		Dates Employed		Work Performed
Address		From	To	
Telephone number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

**EDUCATION**

Type of School Attended	School Name, Location, and Dates of Attendance	Did you Graduate? Yes / No	Field of Study
High School: <small>circle highest grade completed</small> 9 10 11 12			
Additional Education Vocational, Technical, University, College			
Additional Training/Qualifications			

**SPECIAL SKILLS AND QUALIFICATIONS**

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**PROFESSIONAL REFERENCES**

List names and contact information of three professional references. Professional references may include previous co-workers, supervisors, instructors, or other individuals who are familiar with your professional experiences.

Name of Reference	Company Name	Job Title	Telephone Number

This certifies that the applicant listed below has completed this application and that all entries/information contained herein are true and complete to the best of their knowledge. It is understood that if the applicant is employed, false statements may result in dismissal. The applicant authorizes Moline Machinery LLC to investigate any facts set forth in this application.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_