

EMPLOYMENT / JOB APPLICATION

Founded in 1982, MAAC Machinery is an industry leading machinery builder serving the plastics industry. MAAC grooms, cross-trains, promotes from within, and strives to do what's best for the future growth of teammates and the company. We thank you for your interest in becoming part of our Team and will review your qualifications promptly!

Please apply on location or contact us via email: jobs@maacmachinery.com or via phone: 630-665-1700

Personal Informati	on								
Full Name (First/Middle/Last)						Today's Da	ite		
Address (Number, Street, City, S	tate, Zip)					Referred B	У		
E-Mail Address					Phone #				
Employment Desire	ed								
Position Applied For			Date Avail	able to Sta	rt	Desired Pa	y (Hourly/S	alary)	
Employment Desired (circle one)		Full-Time		Part-Time		Seasonal		
Are you employed now?	yes	no	If so, may	we contac	t your curre	ent employ	er?	yes	no
Employment Eligib	ility and	d Mil	itary						
Are you legally eligible to work i	n the United	States?			yes		no		
If hired, would you be able to	provide pro	of of leg	al work au	thorization	in the Uni	ted States?		yes	no
Do you have a valid drivers licen	se?				yes		no		
Have you ever worked for MAA(C Machinery	?			yes		no		
If "Yes" please provide dates									
Have you ever been convicted o	f a felony?				yes		no		
If "Yes" please explain briefly									
Are you a veteran of the U.S Mil	itary service	?			yes		no		
If "Yes" please explain									
Please list any working restriction	ons								
If asked, are you willing to conse	ent to a back	ground	check?		yes		no		
Education and Trai									
High School attended and Locati	ion			Graduate?)		# of Years o	completed	
College attended and Location				Graduate?)		Degree		
Other (Trade Schools, Special Co	ourses/Exper	ience)		Certification	on		# of Years o	completed	
<u> </u>									

Previous Employment							
Employer Company 1	Addre	Address (Number, Street, City, State, Zip)					
Job Title	Duties/Respons	Duties/Responsibilities					
Dates employed (month/year)		Starting Pay		Ending Pay			
Supervisor/Contact Name	Contact E-mail		Contact Ph	tact Phone			
Reason for Leaving							
mployer Company 2	Addre	ess (Number, Street, Ci	ty, State, Zip)				
Job Title	Duties/Respons	Duties/Responsibilities					
Dates employed (month/year)		Starting Pay		Ending Pay			
Supervisor/Contact Name	Contact E-mail		Contact Ph	none			
Reason for Leaving							
mployer Company 3	Addre	ess (Number, Street, Ci	ty, State, Zip)				
Job Title	Duties/Respons	Duties/Responsibilities					
Dates employed (month/year)	Starting Pay		Ending Pay				
Please State any additional informati	on you feel may be he	elpful to us in consideri	ng your applica	ation			
References ull Name 1	Company	Title		Relationship			
eference E-mail		Refere	nce Phone				
ull Name 2	Company	Title		Relationship			
eference E-mail	Refere	Reference Phone					
Disclaimer							
pplicant understands that this is an nsure this application is acceptable, the Applicant, certify that my answ ventual employment, I understand to mployment being terminated.	please fully complete ers are true and hone	e this application in ord est to the best of my kn	er for it to be o owledge. If thi	considered. s application leads to my			
ignature	Print Name			Date			