



Application for Employment

Employees of Brenner Tank and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age.

Position(s) Applied For		Date of Application	
How Did You Learn About Us?		<input type="checkbox"/> Job Net	<input type="checkbox"/> Relative
<input type="checkbox"/> Advertisement _____ (Newspaper, Date)	<input type="checkbox"/> Brenner Website	<input type="checkbox"/> Friend	
<input type="checkbox"/> Job Fair _____ (Location, Date)	<input type="checkbox"/> Inquiry (Walk-In)	<input type="checkbox"/> Other _____	
Last Name		First Name	
		Middle Initial	
Address	Number	Street	City
			State
		Zip Code	
Home Phone		Other Phone	
Social Security Number		(Note: Completion of SS# is optional. Failure to submit SS# on this form will not prohibit employment consideration. SS# may be required on other forms prior to employment.)	

Best time to contact you at home is: _____:_____ (circle) AM / PM

If you are under 18 years of age, can you provide required proof of eligibility to work? Yes No N/A

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

Have you ever been employed with us before? If Yes, give dates _____ Yes No

Do any of your friends or relatives work here? If Yes, give name _____ Yes No

Are you currently employed? Yes No

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

Can you with or without reasonable accommodation perform the essential functions of this job? (If you have any questions about the functions of the job, please ask Human Resources before answering.) Yes No

For purposes of compliance with The Immigration Reform and Control Act, are you legally eligible for employment in the United States? Yes No

Under the Immigration Reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you be employed.

Date Available for work: ____/____/____ What is your desired salary range? _____

Are you available to work: Full Time (Please indicate 1 2 3 shift)
 Part Time (Please indicate Mornings Afternoon Evenings)
 Temporary (Please indicate dates available ____/____ - ____/____)

Will you work overtime, including occasional Saturdays? Yes No

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

WORK EXPERIENCE

*Start with your **present** or **last** job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. Highlight your knowledge, skills and abilities which best demonstrate your qualifications for this position.*

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Use this space for any additional information you think would help us evaluate your application, including training, seminars, and special achievements or specialized skills:

PERSONAL/PROFESSIONAL REFERENCES (Do not include family members.)

	Name	Phone Number	Best Time to Call	Occupation
1.				
2.				
3.				

APPLICANT'S STATEMENT

I hereby certify that all statements contained in this application are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of any employment in the service of Brenner Tank. I understand that all information on this application is subject to verification and I consent to that process. I also consent that you may contact references, former employers and educational institutions listed regarding this application. I further authorize Brenner Tank to rely upon and use, as it sees fit, any information received from such contacts. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Brenner Tank is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

Signature of Applicant

Date

Print, Complete and Mail to:
Brenner Tank LLC, Attn: Human Resources,
PO Box 670, Fond du Lac, WI 54936

*Brenner Tank LLC
450 Arlington Ave. PO Box 670
Fond du Lac, WI 54936-0670*