Employment Application – Wisconsin Locations

We are an Equal Opportunity Employer

MGS Mfg. Group, Inc. ("MGS") is an equal opportunity employer and all personnel actions are based upon personal capabilities and qualifications, without regard to race, color, creed, religion, sex (including pregnancy, childbirth, and related medical conditions), age, national origin, disability, marital status, sexual orientation, gender identity or expression, military status, genetic information, or any other characteristic protected by applicable local, state, or federal law.

You must complete entire application and sign where indicated. Applications may be completed electronically or in print. Please notify Human Resources of any needed accommodation(s) to complete the application process.

Date:

Applicant Information	
Name (first, middle, last)	
Address (street, city, state, zip code)	Mobile Telephone ( ) -
Email Address:	Home Telephone ( ) -

Are there other names under which you have worked or attended school? ☐ Yes ☐ No
If yes, please list for reference checking purposes.

Are you legally authorized to work in the U.S.? ☐ Yes ☐ No
(If hired, you will be required to provide proof of work authorization.)

Will you now or in the future require sponsorship for employment visa status (e.g., H-IB visa status)? ☐ Yes ☐ No

Are you at least 18 years old? ☐ Yes ☐ No
If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for and have obtained a valid work permit.

Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations?* ☐ Yes ☐ No If Yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted.

Do you have any pending criminal charges against you?* ☐ Yes ☐ No
If Yes, describe the 1) nature of the charges, 2) date issued, and 3) county and state where issued.

**Pending arrests and convictions will only be given consideration if the offenses are substantially related to the position sought with the company.*

Have you ever applied at this company before?	Have you ever worked at this company before?
☐ Yes ☐ No If yes, when:	☐ Yes ☐ No If yes, when:

Position Applying For	**Part-Time or Full-Time Desired**	**Salary Preference**	**Date Available to Start**

Shift Preference (Check all that apply) ☐ 1st ☐ 2nd ☐ 3rd ☐ 12 Hour Day ☐ 12 Hour Night

How were you referred to the company? ☐ Agency ☐ Website ☐ Friend/Relative _____
☐ Social Media ☐ School ☐ Other _____

1. If relevant, please describe computer proficiency, software knowledge, and office equipment experience.

MGS Mfg. Group, Inc. W188 N11707 Maple Road Germantown, Wisconsin, USA 53022 **Direct** (262) 255-5790 **Email** careers@mgsmfg.com **Web** mgsmfg.com

2. If relevant, please describe experience using manufacturing machines and equipment.

Education

School Name	Location (city, state)	Number of Years Attended	Major subjects	Diploma or Degree Received
High				☐ Yes ☐ No
College				☐ Yes ☐ No Type:
Graduate				☐ Yes ☐ No Type:
Other (specify)				☐ Yes ☐ No Type:

Training Courses

List any relevant training programs completed.

Course/Seminar	Organization Sponsoring	Content	Date(s) Attended

Required License(s)

If required to drive a motor vehicle for the job applying for, you will be required to have a valid driver's license and will be required to provide your information if offered employment.

Do you have a valid driver's license? ☐ Yes ☐ No

Are you licensed with any group, association or society relating to the job for which you are applying?

☐ Yes ☐ No

Registration or License Number	State Issued	Expiration Date

Employment History (start with most recent; use separate sheet if necessary)	
Name of Employer:	Telephone ( ) -
Address:	
Job Title:	Employment Dates (month and year)
Name of Immediate Supervisor:	From: To:
Description of Duties:	
Salary (start): Salary (end):	Reason for Leaving:
If currently employed, may we contact as a reference? ☐ Yes ☐ No	
Name of Employer:	Telephone ( ) -
Address:	
Job Title:	Employment Dates (month and year)
Name of Immediate Supervisor:	From: To:
Description of Duties:	
Salary (start): Salary (end):	Reason for Leaving:
Name of Employer:	Telephone ( ) -
Address:	
Job Title:	Employment Dates (month and year)
Name of Immediate Supervisor:	From: To:
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Name of Immediate Supervisor:	From: To:
Description of Duties:	
Salary (start): Salary (end):	Reason for Leaving:

Employment References	
List individuals familiar with your job qualifications (no relatives or personal friends).	
Name:	Telephone ( ) -
Working Relationship:	Email Address:
Company Worked at with:	How long known?
Name:	Telephone ( ) -
Working Relationship:	Email Address:
Company Worked at with:	How long known?
Name:	Telephone ( ) -
Working Relationship:	Email Address:
Company Worked at with:	How long known?

Please Read Carefully Before Signing This Form

1. All information contained in this application is true and correct to the best of my knowledge and belief. I understand that any false or misleading statements or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.
2. I understand that applications must be completed in its entirely. Incomplete applications will not be accepted. I understand that my signature is required below.
3. The company does not unlawfully discriminate in employment, and no question on this application is used for the purpose of limiting or excusing any application from consideration for employment on a basis prohibited by local, state or federal law. I understand that it's the company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation, in accordance with applicable federal, local and state law.
4. This application will remain on file in accordance with state and federal laws. At the conclusion of this time, if I have not heard from the company and still wish to be considered for employment, it will be necessary to fill out a new application.
5. I authorize the company to thoroughly investigate my work record, education, references, and other matters related to my suitability for employment, and further authorize the individuals I have listed to disclose to the company any and all letters, reports, and other information related to me and my work records, without giving me prior notice of such disclosure. In addition, I release the company, the company's employees, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
6. I understand that upon receiving a job offer, a background check and drug screening may be required, as allowed by and in accordance with applicable law. (Note: If this is a job requirement, you will be notified.)
7. Regardless of whether or not I become employed by the company, I recognize this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than the CEO of the company, and then only by means of a signed, written document.

Signed by _____ Date _____

Thank you for your interest in MGS!