

# *Jantz Supply*

## APPLICATION FOR EMPLOYMENT

### About Jantz Supply

**Jantz Supply** manufactures and sells small tools and knifemaking components such as pre-shaped knife blades, guards, rivets, drills, abrasives, machinery, and much more. Our customers are from all over the world. Jantz advertises nationally and maintains a catalog of our products. We have a walk-in store located in Davis, OK and all of our facilities and employment opportunities are located in Davis, OK.

**Sales and Service Team Members** focus on assisting customers by phone, online and in person with sales and technical support. These team members represent the company directly to the customer and must be able to learn technical details of products, be well spoken and able to manage multiple tasks and phone calls simultaneously.

**Warehouse and Operations Team Members** focus on receiving products accurately and efficiently to our warehouse, preparing customer orders for shipping and keeping inventory accurate and up to date. Team members must have good basic reading, writing and math skills.

**Manufacturing Team Members** focus on the development and production of many of our products. Team members work in a noisy, machine shop environment and run large and small equipment with fast moving parts and sharp blades. Team members must be willing and interested in learning new skills. Team members must be able to follow verbal directions and understand basic measurement and machine operations.

### Important Applicant Information

All applicants should be looking for steady, long term employment. We seek employees who are willing to go above and beyond their own assigned duties and are willing and able to help other team members. Applicants must be willing to learn our product line. We need people who work well with others as well as on their own. All team members are expected to adhere to safety standards and practices.

All applicants should have reliable transportation to and from work and flexible work schedule availability. Our primary hours are Monday-Friday from 8:30 – 5:30pm. Some team members also work on Saturday from 9am-4pm. Each department maintains its own work hours based on the current needs of the management and workload. We make every effort to be flexible and work with our employees but it is anticipated that you will also be flexible when overtime or special hours and days are necessary due to the workload.

All applicants should understand before applying that no vacation or time off will be approved from October through February as that is traditionally our busiest time of the year.

Employees are not able to assist you with the application completion process as your ability to do so is part of our assessment of your basic literacy skills. If you have a question, an employee can ask if a member of management is available to assist you.

Any applicant who is offered conditional employment may be required to pass a drug test.

**If the application is not completed in full, you will not be considered for employment.**

I have read the information on this page and understand the expectations of employment at Jantz Supply

\_\_\_\_\_  
(Applicant's signature)

\_\_\_\_\_  
(Date)

Typing your name and submitting this application  
will be considered a valid signature for the purposes of this document.

# *Jantz Supply*

## **REFERENCE AND BACKGROUND CHECK AUTHORIZATION**

I, \_\_\_\_\_, authorize Jantz Supply or its designee to conduct an investigation of my references, employment record, education, criminal conviction record, credit record, driving record, and any other matters relating to my suitability for employment.

I further authorize my current and former employers, schools, credit reporting agencies, government agencies and law enforcement agencies to disclose in good faith any information they may have regarding my qualifications and suitability for employment to Jantz Supply or its designee, without restriction or qualification, and without giving me any further notice of such disclosure.

I agree to allow Jantz Supply or its designee to contact any person, educational institution, association, society or company I have listed in this application. I agree not to hold any person, educational institution, association, society or company I have listed in this application liable for damages relating to any truthful information they provide regarding my qualifications for employment at Jantz Supply.

I understand that reference information may include, but is not limited to, information about my employment performance, professional demeanor and character, rehire recommendation, dates of employment, criminal convictions, salary and employment history.

I release Jantz Supply, its designees, its employees, representatives or agents, as well as my former employers and all references, schools, credit reporting agencies, government agencies and law enforcement agencies from any claims, demands or potential liabilities arising out of or related to such investigation, and/or the disclosure of the investigation results.

I further agree not to file or pursue any complaints, claims, or legal actions of any kind regarding activities or actions performed in connection with the background check, and/or the disclosure of the background investigation results.

I understand that any information released by my prior employer will be held in strictest confidence, that it will be viewed only by those involved in the hiring decision, and that neither I nor anyone else not so involved will have the right to see the information.

I understand that this authorization to release employment-related information is only effective for **six (6) months** from the date signed. I understand that by declining to sign my application for employment will not be reviewed or considered.

I further understand that I may withdraw this authorization at any time; however, the withdrawal must be made in writing and submitted to Jantz Supply Human Resources Department.

\_\_\_\_\_  
(Applicant's signature)

\_\_\_\_\_  
(Date)

**Typing your name and submitting this application will be considered a valid signature for the purposes of this document.**

# PERSONAL INFORMATION

PLEASE PRINT CLEARLY AND LEGIBLY.

Your name: \_\_\_\_\_

Have you ever been known by a different name? Is additional information regarding different names, change of name, nick names, etc. necessary to conduct a background check? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Are you at least 18 years of age or older? \_\_\_\_\_ If no, what is your age? \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's license number and state: \_\_\_\_\_

Current address (street, city, state, zip): \_\_\_\_\_

How long have you lived at your current address?: \_\_\_\_\_

Addresses for the past seven (7) years: \_\_\_\_\_

\_\_\_\_\_  
*(use the back of this page if more space needed)*

Home phone number: \_\_\_\_\_ Mobile phone number: \_\_\_\_\_

Other number to reach you: \_\_\_\_\_ whose phone is this? \_\_\_\_\_

Date available to begin work: \_\_\_\_\_ Expected Salary: \_\_\_\_\_

Are there any days or hours you are unable to work? \_\_\_\_\_

Can you, after employment, submit verification of your legal right to work in the U.S.? \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Have you ever pled guilty or nolo contendere? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Have you ever been placed on probation? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

## PERSONAL INFORMATION

Do you have trouble with your vision? \_\_\_\_\_ If yes, describe difficulty and corrections you are able to take:

\_\_\_\_\_

Are you able to independently lift at least 60 pounds? \_\_\_\_\_ If no, please explain your limitations: \_\_\_\_\_

\_\_\_\_\_

Are there any health concerns that might limit your ability to lift heavy objects, walk and stand for long periods of time, sit for long periods of time, conduct repetitive actions, work in with heavy machinery, etc.? \_\_\_\_\_

If yes, please explain in detail: \_\_\_\_\_

*(use back of this page if additional space needed)*

Name of spouse or significant other: \_\_\_\_\_

Where does your spouse / significant other work? \_\_\_\_\_

What are your hobbies? \_\_\_\_\_

Use this space for any additional information you may have that may help us in selecting you for this job. Including any related interests that may give insight into your ability to learn skills required for this job.

\_\_\_\_\_

\_\_\_\_\_

Why do you want this job? \_\_\_\_\_

\_\_\_\_\_

Why should we choose you for this job? \_\_\_\_\_

\_\_\_\_\_

## PERSONAL REFERENCES

List 3 people you know well (not related to you) that we may contact regarding your personal character and abilities.

1. \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

3. \_\_\_\_\_ Phone: \_\_\_\_\_

If submitting this application via email - do not complete this page.  
You will be asked to complete it if an interview is scheduled

## BASIC SKILLS ASSESSMENT

Write the alphabet in clear, legible print: \_\_\_\_\_

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What letter comes after M in the alphabet? \_\_\_\_\_ What letter comes before R in the alphabet? \_\_\_\_\_

Write the numbers 0-10 in clear, legible print: \_\_\_\_\_

What number comes after 33? \_\_\_\_\_ What number comes before 80? \_\_\_\_\_

Answer the following math questions:

$2+2 =$  \_\_\_\_\_       $10+10 =$  \_\_\_\_\_       $5-3 =$  \_\_\_\_\_       $10-1 =$  \_\_\_\_\_

Count the pens below and write how many: \_\_\_\_\_



### FOR APPLICANTS WISHING TO APPLY FOR WORK IN MANUFACTURING

$1/16'' + 5/32'' =$  \_\_\_\_\_       $.500'' + 1/8'' =$  \_\_\_\_\_       $.010'' + .1250'' =$  \_\_\_\_\_

.125  
+ .675  
- .250  
+ .050  
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# WORK EXPERIENCE

Have you ever been suspended, dismissed, terminated, or asked to resign from any job?  Yes  No  
If yes, please explain the circumstances: \_\_\_\_\_

**Current Employment:** Are you currently employed?

No - How long have you been unemployed? \_\_\_\_\_  Yes – Current Employer: \_\_\_\_\_

Name of current supervisor? \_\_\_\_\_

May we contact your current employer?  No  Yes – Phone# \_\_\_\_\_

If no, please explain reason: \_\_\_\_\_

**Please provide additional employment history – most recent first – use back for more if needed; provide up to 10 years of employment history.**

Check here if you are attaching a resume in lieu of completing this portion of the application; please answer any questions on this application that are not answered on your resume

Company Name: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Dates employed: Start: \_\_\_\_\_ End: \_\_\_\_\_

Salary when first hired: \_\_\_\_\_ Salary when ended: \_\_\_\_\_

Job description: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Company Name: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Dates employed: Start: \_\_\_\_\_ End: \_\_\_\_\_

Salary when first hired: \_\_\_\_\_ Salary when ended: \_\_\_\_\_

Job description: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

\*\*\*\*\***write additional work history on the back of this page....**

# EDUCATION AND TRAINING

Name, city and state of high school: \_\_\_\_\_

What year did you finish? \_\_\_\_\_

Indicate graduation status (check applicable):  Diploma  GED  Did not complete high school

Did you attend college / university? \_\_\_\_\_ If yes, complete information below:

Name of college / university	Date(s) attended	What studied	Degree received?

Did you attend any technical school or post-high school training? \_\_\_\_\_ If yes, complete information below:

Name of school / training	Date(s) attended	What studied	Certificate received?

List any other training and/or experience relevant to this job: \_\_\_\_\_

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## SIGNATURE OF APPLICANT

I certify that all information given in this application is true and correct. I understand that any misleading or false statements to these questions may be reason for denial of benefits and/or immediate termination of employment. Permission is granted to Jantz Supply to investigate my employment history, education, background, and solicit statements or information from any person, company, agency or source listed in this application.

\_\_\_\_\_  
(Applicant's signature)

\_\_\_\_\_  
(Date)

**Typing your name and submitting this application will be considered a valid signature for the purposes of this document.**