



KLEIN-DICKERT
CO., INC.

APPLICATION FOR EMPLOYMENT
(Please Print)

4702 Helgesen Dr.
Madison, WI 53718
608-258-3310
Fax: 608-258-3305
www.klein-dickert.com

We are an equal opportunity employer, dedicated to a policy of nondiscrimination on any basis including but not limited to age, sex, color, race, creed, national origin, religious persuasion, marital status, political belief, sexual preference or disability that does not prohibit performance of essential job functions and any other characteristic protected by local, state or federal law. All qualified persons are welcome to submit application for employment. This application will be considered current for 30 days from its date. After that period, a new application must be submitted if you still desire employment with us.

DATE: _____

I. PERSONAL INFORMATION

NAME: LAST FIRST MIDDLE

PRESENT ADDRESS

PERMANENT ADDRESS (IF DIFFERENT THAN ABOVE)

SOCIAL SECURITY #

TELEPHONE #

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, Green Card, etc.) within three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

POSITION APPLIED FOR: _____

1. Is there any information we would need about your name or use of another name for us to be able to check your work record? Please Specify:

2. How were you referred to Klein-Dickert?

3. Have you ever been convicted of a misdemeanor or felony? ___ Yes ___ No
Are you currently subject to a pending criminal charge? ___ Yes ___ No
If yes to either question, please provide further information as to the offense(s), date location and specifics. (We will consider this matter only as it may substantially relate to the job for which you are applying).

II. EDUCATION HISTORY

(School: Name/Location Years Completed Degree/Diploma)

High School: _____

Tech. Training: _____

College: _____

Other (any other training or apprenticeship programs you consider relevant to the position for which you are applying):

III. EMPLOYMENT RECORD: (Please include all employment for the last 10 years.)

1. _____

Company Name (Current/Most Recent Employer)	Position Held	
_____	Dates Employed: _____	
Address	From	To
_____	_____	_____
Manager / Supervisor	Telephone	Wage/Salary
_____	_____	_____
Reason For Leaving		

2. _____

Company Name	Position Held	
_____	Dates Employed: _____	
Address	From	To
_____	_____	_____
Manager / Supervisor	Telephone	Wage/Salary
_____	_____	_____
Reason For Leaving		

3. _____

Company Name	Position Held	
_____	Dates Employed: _____	
Address	From	To
_____	_____	_____
Manager / Supervisor	Telephone	Wage/Salary
_____	_____	_____
Reason For Leaving		

NOTE: Use a separate sheet to list additional employers, if necessary. We will contact all of the employers listed on this application.

IV. REFERENCES: (Include only those who are familiar with your work history and work related skills. Please do not include relatives)

1. _____

Name	Occupation	Years Known
_____	_____	_____
Address	Telephone	
_____	_____	

2. _____
 Name Occupation Years Known

 Address Telephone

3. _____
 Name Occupation Years Known

 Address Telephone

V. WORK AVAILABILITY

1. If your application receives favorable consideration, when will you be available to begin work?

2. Will you work overtime? () YES () NO

3. Can you work overtime without prior notice? () YES () NO

4. Can you work on Saturday? () YES () NO

5. Can you travel if required by this position? () YES () NO

6. Is there any reason why you may not be able to do your job, get to work on time, and maintain regular attendance? () YES () NO (If yes, please explain)

7.a. If the position requires the use of a motor vehicle, do you have a valid WI driver's license?
 () YES () NO

b. If the position requires the use of a commercial driver's license, do you have a valid WI commercial driver's license? () YES () NO

c. WI driver's license number: _____

d. Has your driver's license been revoked or suspended in the last 3 years? () YES () NO

If yes, please explain: _____

e. Have you had any moving violations or accidents in the last 3 years? () YES () NO

If yes, please show details below:

Month/Year	Description of Violation	Month/Year	Description of Violation
_____	_____	_____	_____
_____	_____	_____	_____

8. Will you abide by the safety rules of this company? () YES () NO

VI. SALARY AND HOURLY RATE REQUIREMENTS:

If your application receives favorable consideration, what salary/hourly rate would you require?

\$_____ per _____

AUTHORIZATION, RELEASE, AND CERTIFICATION

Please read this section carefully and acknowledge your understanding by signing your name in the space provided.

1. CONSENT TO CONDUCT BACKGROUND INVESTIGATION

As a condition of and in consideration for Klein-Dickert's consideration of this application, I give permission to Klein-Dickert to investigate my personal and employment history. I understand that this background investigation will include, but not be limited to, verification of all information on this application, criminal charges or conviction, as well as interviews with past employers. In accordance with federal, state and local law, pending criminal charges or any convictions will not be considered unless they are substantially related to circumstances of the particular job. Convictions and pending charges not reported will be cause for disqualification of your application.

2. CONSENT TO CONTACT PAST EMPLOYERS

I give permission to Klein-Dickert to contact all employers listed in this application for references. I further give permission to all current or previous employers and/or managers or supervisors to discuss my relevant personal and employment history with Klein-Dickert, consent to the release of such information orally or in writing, and hereby release them and Klein-Dickert from all liability and agree not to sue them for defamation or other claims based upon any statements they make to any representative of Klein-Dickert. I further waive all rights I may have under stated law to receive a copy of any written statement provided by any of my former employers to Klein-Dickert. I further agree to indemnify all past employers and Klein-Dickert for any liability they may incur because of their reliance upon this release.

3. CONSENT TO CONTACT GOVERNMENT AGENCIES

I give permission to any agent, attorney or representative of Klein-Dickert to receive a copy of any information obtained in the file of any federal, state or local court, governmental agency, law enforcement agency or investigator concerning or relating to me. I further consent to the release of such information and waive any right under state law concerning notification of the request for a release of such information. In the event a state law does not provide for prospective employers to have access to information, I hereby delegate Klein-Dickert as my agent for receipt of information. I understand that the scope of this will be limited to criminal and/ or civil records that relate to my honesty, integrity, abilities and/or work history.

4. COOPERATION WITH INVESTIGATION

I agree to fully cooperate in Klein-Dickert's background investigation, and to sign any waivers or releases that may be necessary to obtain access to relevant information. In the event that any former employer or federal, state or local governmental agency will not release reference information of criminal history information directly to the employer, I agree to personally request such information to the extent permitted by law.

5. FALSIFICATION STATEMENT

I understand that any falsification or willful omission of fact made in this application or in connection with any background investigation may be sufficient grounds for rejection of this application, or, if discovered after an offer of employment, for immediate dismissal.

6. EMPLOYMENT AT WILL

In consideration of my employment, I agree to conform to the rules and regulations of Klein-Dickert, and my employment and compensation is "at will" in that I can be terminated with or without cause, and with or without notice, at any time, at the option of either Klein-Dickert or myself, except as otherwise provided by law. I understand that no manager or representative of Klein-Dickert, other than the CEO or Executive Vice President (EVP) of Klein-Dickert, has authority to enter into any agreement for employment for any specified period of time or to make any agreement or contract to the foregoing, and that any promises to the contrary will only be relied upon by me if they are in writing and signed by the CEO or EVP of Klein-Dickert.

7. CONSENT TO CONDUCT MEDICAL EXAMINATION

I understand that I may be required to submit to a medical examination if offered a position and that officer is contingent upon the results of the medical examination. I also understand that I may be required to submit to testing for controlled substances or other drugs.

I understand this application will be inactive after 30 days. I am aware that this application is for the facility or location referenced above only. I am aware that my birth date will be used for criminal background checks only. I **certify** that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge. I also **certify** that I have read (or have had read to me) and understand this authorization, release, and certification.

KLEIN-DICKERT CO., INC.
AN EQUAL OPPORTUNITY EMPLOYER
PAINT CONTRACTING DIVISION

□ 4702 HELGESEN DR. • MADISON, WI 53718 • (608) 258-3310 • FAX: 258-3305

PAINTING AND WALLPAPERING QUALIFICATIONS

NOTE: All painters and/or wallcovering installers seeking employment with Klein-Dickert Co., Inc. must have the following abilities:

1. Knowledge of different paint types and paint application methods.
2. Climbing of ladders and scaffolding.
3. Operation of lifts.
4. Working at great heights (possible as high as 80 feet).
5. Distinguishing colors and various shades.
6. Lifting up to five gallons of latex paint (approximately 60 pounds).
7. Knowledge of vinyl, paper and fabric installation procedures.
8. Transportation to job sites without company assistance (may be as far as 80 miles from home or paint shop).

Answers to the following questions will help Klein-Dickert identify current trade skills.

1. Do you have experience in the following areas? (Check the answer that best describes your experience)

◆ Spraying:	___ Conventional	___ Airless	___ Textures
◆ Use of Brush and roller	___ YES	___ NO	
◆ Wallpaper installation	___ YES	___ NO	
◆ Swing stages	___ YES	___ NO	
◆ Bolsum Chair	___ YES	___ NO	
◆ Hi lifts	___ YES	___ NO	
◆ Tape and Finishing	___ YES	___ NO	
◆ Electrostatic Painting	___ YES	___ NO	
◆ Furniture Refinishing	___ YES	___ NO	
◆ Sandblasting	___ YES	___ NO	
◆ Waterblasting	___ YES	___ NO	
◆ Color Mixing	___ YES	___ NO	

2. Check the answer that best describe your ability to apply the following materials (only one check for each application please):

- a. Airless spraying which includes masking per day:
___ 0-1,000 sq. ft. ___ 1,001-2,000 sq. ft. ___ >2,000 sq. ft.
- b. Conventional spraying (EX.: Hollow metal doors and hollow metal frames) per day:

___ 0-10 times ___ 11-15 times ___ 16-20 times ___ >20 times

c. Brush and roller application per day:

___ 0-500 sq ft ___ 501-1000 sq ft ___ 1,001 sq ft ___ >2000 sq ft

d. Taping and finishing per day:

___ 0-1000 sq ft ___ 1001-2000 sq ft ___ > 2000 sq ft

3. Check all wallcovering you have installed (check all that apply)

a. ___ 27" vinyl b. ___ 54" vinyl c. ___ cloth fabric

d. ___ grasscloth e. ___ Mylar and foils f. ___ flocks

4. Have you installed wallcovering by the:

◆ Single roll ___ YES ___ NO

◆ Lineal Yards (54") ___ YES ___ NO

5. Check the quality of wallcovering installed (only one check for each application please):

a. Single rolls per day:

___ 0-5 ___ 6-10 ___ 11-15 ___ 16-20 ___ >20

b. Lineal yards (54") per day:

___ 0-25 ___ 26-35 ___ 36-45 ___ 46-55 ___ >56

I acknowledge that I have read, understand and have the abilities listed at the beginning of this questionnaire. I further verify that all the information given above is accurate, to the best of my knowledge. I understand that if hired, any falsification may result in discipline up to and including termination.

Signature: _____

Date: _____

Name (Printed): _____

Klein-Dickert Co., Inc.
Self-identification Form

The City of Madison has adopted an Affirmative Action Ordinance and the following information is voluntary and allows us to meet our government-reporting requirements and evaluate the effectiveness of our recruitment efforts. The information will be kept confidential and when reported, data will not identify any specific individual. Refusal to provide this information will not subject you to any adverse treatment in accordance with Klein-Dickert Policies and Procedures, which forbids discrimination-based on this information.

Last name (print clearly) First name Middle name Date

Applying for the position of: _____

VETERAN STATUS: (Please check one)

- Non Veteran Veteran claiming disability (DD214 Form and Veterans Disability Form must be attached)
- Veteran (DD214 Form must be attached) Other (please specify service dates): _____

ETHNICITY: (Please select one)

- Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin, regardless of race.
- Not Hispanic or Latino

RACE: (Please select one or more)

- American Indian or Alaskan Native – A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American – A person having origins in any of the Black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.
- White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

GENDER: Male Female

DATE OF BIRTH: ____/____/____
 Month Day Year

DISABILITY: Do you have a disability? Yes ** No

A person with a disability is anyone who meets the definition under either the American With Disabilities Act or the Wisconsin Fair Employment Act.

If you need reasonable accommodation(s) during the application process due to disability related functional limitation, please notify the person providing the application.

I need an accommodation in the hiring/examination process: Yes ** No

If yes, accommodation requested is (i.e.: extended time, reader, alternative test format, other): _____

** You will be required to provide written verification from a doctor or other authorized person confirming your disability and indicating reasonable accommodation.

HOW DID YOU LEARN OF THIS VACANCY?

- Word of Mouth (family, friend, employee, etc.) Local Newspaper
- City of Madison Affirmative Action Internet (specify site: _____)
- Union Hall Other: _____