



**Complete this form and fax
back to 440-349-4056**

Mazel,LLP
Application for Employment
 (An Equal Opportunity Employer)

Personal Data (Please Print)

Date _____ - _____ - _____

Name _____ Social Security # _____
Last First Middle

Address _____
Street Apt City State Zip

Telephone: () _____ - _____ Alternate phone () _____ - _____

E-mail address: (Optional) _____ E-mail address will only be used for employment communication.

Are you 18 years of age or more? YES NO

Are you eligible to work in the United States? YES NO

Have you ever plead guilty or been convicted of a crime other than a driving related misdemeanor within the past 7 years? YES NO

If yes, please explain on the given line below (conviction of a crime is not an automatic bar to employment)

Educational Data

Please circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Grad. School 1 2 3 4

| Type of School | Name of School | City/State | Course of Study | Graduated? |
|----------------|----------------|------------|-----------------|------------|
| Grade | | | | |
| High school | | | | |
| College | | | | |
| Grad. School | | | | |

Material Handling Equipment Experience (Rate Yourself, check one)

| Type of Equipment | Expert Abilities | Good Abilities | Novice or no experience |
|-------------------|------------------|----------------|-------------------------|
| Forklift | | | |
| Docker | | | |
| Order Picker | | | |
| Reach Truck | | | |
| Swing Reach | | | |

Computer Experience

MS Word _____ check the
 Excel _____ appropriate
 Powerpoint _____ boxes
 Lotus _____
 Wordperfect _____
 MS Publisher _____
 Others: _____

Mainframe _____ Type _____
 (example IBM AS400)

Position applied for: _____ Are you available full time? _____

Have you ever worked for Mazel before? _____ If so, when _____

Do you have a relative working for Mazel? _____ If so, who? _____

Have you ever been dismissed or involuntarily terminated from any employment? Yes No

Employment History

| Date Month and Year <small>Most Recent Employer first</small> | Name Address Phone of Employer | Salary | Position | Reason for leaving |
|--|---|--------|----------|--------------------|
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |

References

| Name | Phone Number | Business | Years Acquainted |
|------|--------------|----------|------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Are you able to perform the essential functions of the job(s) for which you are applying without accommodation?

YES NO

If NO, please explain:

AFFIDAVIT

I authorize Mazel LLP or its agents to investigate all of the information that I have provided on this employment application. I authorize any references that I have or will provide to give Mazel LLP all information concerning my previous employment and other pertinent information they may have, personal or otherwise, and release Mazel LLP and all references, including past employers from all liability that may result from obtaining such information.

I understand that any false or misleading information provided by me on this application or during any interview may result in my not being hired or later discharged. I understand that this application does not and is not intended to create an express or implied contract of employment or to guarantee employment for any period of time. I understand that if employed, my employment is "at will" and both Mazel LLP and I may at any time end my employment with or without reason and with or without notice. I further understand that this is a 60 day probationary period during which my performance will be evaluated. I further understand that my "at will" employment relationship may not be changed by any written document, by oral statement, or by contract unless such change is acknowledged in writing by the president of the company.

Applicant's Signature _____ Date ____/____/____

This application is valid for 90 days only.