HOURLY EMPLOYMENT APPLICATION

Applicant Name: ________________________

Referred By: ________________________

LIPPERT COMPONENTS, INC.

CONFIDENTIAL

AN EQUAL OPPORTUNITY EMPLOYER, M/F
SPECIFIC WORK EXPERIENCE

Job(s) for which you are applying

☐ General Labor  ☐ Welder  ☐ Transportation
☐ Maintenance  ☐ Fabricator  ☐ Office/Clerical

Please answer all questions below which apply to the job you desire.

ALL APPLICANTS

Can you read a tape measure? ☐ Yes ☐ No

Can you read simple blue prints and/or shop drawings? ☐ Yes ☐ No

Do you have experience working with production-line machinery and equipment? (ex. - shears, presses, lathes, grinders, etc.) ☐ Yes ☐ No

If so, what type of experience do you possess? ________________________________________________

___________________________________________________________

Are you familiar with the set-up, changeover, or repair of production-line machinery? ☐ Yes ☐ No

WELDING APPLICANTS

What type of production-based welding and assembly experience do you possess?

☐ Mobile Home Frame  ☐ RV Frame  ☐ 5th Wheel Assembly  ☐ Travel Trailer
☐ Utility Trailer  ☐ Dumpster  ☐ Landing Gear  ☐ Hydraulic Unit

Years Experience? ______  Other special skills/certifications? ______________________________________

TRANSPORTATION APPLICANTS

Do you possess a Commercial Drivers License in good standing? ☐ Yes ☐ No

– Be advised that your Motor Vehicle Record (MVR) will be evaluated as a condition of employment.
– LCI checks MVR’s on a regular basis. LCI also follows all Federal DOT Drug Testing regulations.

What type(s) of specialized delivery experience do you possess? ______________________________________

______________________________  Years Experience? ______

List all vehicles you are qualified and/or certified to operate (ex. - semi tractor, fork lift truck, heavy construction equipment, etc.) __________________________________________

What experience(s) with load security, load weight distribution, and loading/unloading of vehicles do you possess? __________________________________________
____________________________________
PERSONAL DATA

Name
Address
Telephone No. ( ) 
Social Security No.

Are You Over 18? 
don’t have the legal right to work in the U.S. Yes / No
(The Immigration Reform and Control Act of 1986 requires verification of work authorization and identity documents prior to employment.)

If hired, do you have a reliable method of transportation to work? Type

Overtime work is a requirement. Will you work overtime when requested? Yes No

Person through whom you may be contacted if you move or in the event of an emergency: 

Name Address 

City State Zip Code 

Home Phone Work Phone

EDUCATION (Circle highest year completed)

GRADE SCHOOL 

HIGH SCHOOL 

COLLEGE 

PREVIOUS EMPLOYMENT RECORD (Start with present or last employer)

Company Name Dates Employed Job Title and Reason for Leaving Wage
From To Nature of Work 

Starting: Ending:

Company Name Dates Employed Job Title and Reason for Leaving Wage
From To Nature of Work 

Starting: Ending:

Company Name Dates Employed Job Title and Reason for Leaving Wage
From To Nature of Work 

Starting: Ending:

Company Name Dates Employed Job Title and Reason for Leaving Wage
From To Nature of Work 

Starting: Ending:

MISCELLANEOUS

Have you ever been convicted of a crime other than a routine traffic violation? If yes, please explain. (not an automatic bar to employment, all circumstances will be considered)
Please present any additional information concerning your work and experience which you believe will be helpful to us in evaluating your qualifications or which may be necessary to prevent any statement contained in this application from being misleading.

________________________________________________________

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IMPORTANT!!! PLEASE READ AND SIGN YOUR NAME

I hereby certify that the information provided by me in this application is true and without material omission. I agree that Lippert Components, Inc., and subsidiaries shall have no liability if my employment is terminated because of false or material omission of any information on this application. I also authorize the companies, schools and persons named herein to release any employment and background information they have regarding me, whether or not it is in their records, and hereby release said companies, schools and persons from all liability on account of said release.

I further consent and agree to hold the Company harmless and indemnify it with regard to disclosures of this Employment Application and/or the information contained herein when it is disclosed to third parties in accordance with applicable law, disclosed to governmental agencies of the United States or of any individual state, or when it is disclosed under subpoena. If I should be hired by the Company, I hereby consent and agree to hold the Company harmless and indemnify it with regard to disclosures of all contents of my personnel file when such is disclosed to third parties in accordance with applicable law, disclosed to governmental agencies of the United States or of any individual state, or when it is disclosed under subpoena. My consent to the aforementioned disclosure includes, but is not limited to, the following types of documents: medical and health related records, drug testing records, disciplinary reports and related documentation, sign off forms, employment application and related documentation.

The Company has a commitment to all its employees, customers, and the public at large to assure safety in the workplace, on company premises, and in the products it sells and distributes. I hereby consent to a medically supervised and licensed toxicology laboratory alcohol and drug screening test which may include obtaining urine specimen, blood sample or other appropriate medical test as part of the normal pre-employment process and as a condition of employment. I understand that failure of said test will result in termination, and that I will be responsible for any costs related to a failed drug test.

I understand that if employed, it is not guaranteed for any specified period of time and that my employment may be terminated by my employer or myself without cause. I understand that the Company does not offer any contract or guarantees of employment, express, implied or otherwise, and therefore, any such agreement would be an extraordinary agreement and as such, must be in writing and signed by the president of the Company. I also understand that completion of this application, which will remain in effect for ninety days, does not indicate positions are open or obligate the company in any way.

SIGNATURE OF APPLICANT __________________________ DATE ________