



EMPLOYMENT APPLICATION

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1303 Minnick Road | Bad Axe, MI 48413
 Phone: (989) 269-6829 | FAX: (989) 269-8985
 E-Mail: dwsalvage@dwsalvage.biz
 Website: www.dwsalvage.biz

PLEASE PRINT CLEARLY

EMPLOYMENT DESIRED

Position applying for: Heavy Equipment Operator		Today's date:
Type of employment desired? <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Summer Only	When can you start?	Hourly salary desired:
How did you hear about this position? <input type="checkbox"/> Walk-In <input type="checkbox"/> By a Company Employee <input type="checkbox"/> Employment Agency <input type="checkbox"/> Career Center <input type="checkbox"/> Advertisement <input type="checkbox"/> D&W Website Job Posting		If you were referred to D&W Salvage, please provide the name of the person and/or company who referred you:

PERSONAL INFORMATION

Name (First, Middle Initial, Last):		
Address (Street, City, State, ZIP):		
Phone Number (land line):	Cell Phone Number:	E-mail address:
Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you presently capable, with or without accommodation, of performing the job for which you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a U.S. Citizen, lawful resident of the U.S., or if hired, can you provide proof that you are authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Driver's license type: <input type="checkbox"/> Operator <input type="checkbox"/> Chauffeur	License Number will need to be provided only after a job offer	CDL Group: Endorsements: Restrictions:
Have you ever been convicted of a felony or a misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever been arrested for a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No

Criminal convictions, by themselves, will not disqualify an applicant from employment; however, this information will be evaluated in relation to the nature of the work for which you may be considered.

EDUCATION HISTORY

Did you receive? <input type="checkbox"/> High School Diploma <input type="checkbox"/> GED <input type="checkbox"/> HiSET	Post-Secondary Degree? <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, which branch:
High School attended and location:	Highest Grade Completed:	Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Trade, business, or correspondence school attended and location:	Years Attended:	Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
College or University attended and location:	Years Attended:	Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Subjects of special study, professional/technical training, or special certifications completed while in school:		

Special skills, experience, qualifications, or volunteer activities, which you feel would aid in your employment with D&W Salvage:
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You may exclude those which disclose your race, religion, national origin, gender, age, or disability.

D&W Salvage, Inc. is an Equal Opportunity Employer and does not discriminate based on race, religion, national origin, gender, uniformed service, height, weight, marital status, age, or disability.

EMPLOYMENT INFORMATION

Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, may we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you currently laid-off and subject to recall?: <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever worked for D&W Salvage? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, why did you leave?	Do you have any relatives working here? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, who?
Have you ever been discharged from a company? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:	

WORK HISTORY

(list most recent position first)

1. Name of Employer:		Name of Supervisor:	
Address (Street, City, State, ZIP):	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone Number:	
Position/Duties:		Date Hired:	Date Left:
Reason for leaving:		Starting Salary:	Final Salary:
2. Name of Employer:		Name of Supervisor:	
Address (Street, City, State, ZIP):	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone Number:	
Position/Duties:		Date Hired:	Date Left:
Reason for leaving:		Starting Salary:	Final Salary:
3. Name of Employer:		Name of Supervisor:	
Address (Street, City, State, ZIP):	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone Number:	
Position/Duties:		Date Hired:	Date Left:
Reason for leaving:		Starting Salary:	Final Salary:

By indicating that we may contact your employer(s)/supervisor(s) listed above, you are hereby releasing any such employer or persons from any and all liability on account of furnishing lawful information.

TECHNICAL APPLICATION AND SKILLS

(please check only the areas in which you have experience)

General Areas	Support Areas	Technical Areas
<input type="checkbox"/> General Factory <input type="checkbox"/> Assembly/Production <input type="checkbox"/> Machine Operator (CNC, presses, etc.) <input type="checkbox"/> Heavy Equipment Operator <input type="checkbox"/> Customer Service <input type="checkbox"/> Clerical/Office Work <input type="checkbox"/> Management/Supervisory Role <input type="checkbox"/> Other (Please Specify)	<input type="checkbox"/> Janitorial <input type="checkbox"/> Hi-Lo/Forklift Operator <input type="checkbox"/> Inventory <input type="checkbox"/> Shipping/Receiving <input type="checkbox"/> Warehousing <input type="checkbox"/> Logistics <input type="checkbox"/> Truck Driver <input type="checkbox"/> Other (Please Specify)	<input type="checkbox"/> Maintenance <input type="checkbox"/> Welder <input type="checkbox"/> Torching <input type="checkbox"/> Machine Repair/Troubleshooting <input type="checkbox"/> Hydraulics <input type="checkbox"/> Computer/Data Entry <input type="checkbox"/> Accounts Payable/Accounts Receivable <input type="checkbox"/> Other (Please Specify)

PERSONAL REFERENCES

(do not list relatives or former employers)

Name:	Occupation:	Phone Number:
Name:	Occupation:	Phone Number:
Name:	Occupation:	Phone Number:



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APPLICANT'S STATEMENT

I authorize D&W Salvage, Inc. to contact my former employers, physicians, and all other relevant sources as it sees fit in order to verify the facts and information furnished about my qualifications and character. I release such employers, persons, or organizations from any and all liability on account of furnishing lawful information, and I waive any written notice of the realize of such records as may be required by state and federal law.

I authorize D&W Salvage, Inc. to inquire about my driving record with the State of Michigan, and I also authorize their insurance agent to provide them with the information found on this report.

I understand that any offer of employment is contingent on my satisfactory completion of a background check that will include my criminal history, department of motor vehicle records, other public records, and a reference check from current and former employers, references, and educational institutions. *(The proper consent and authorization forms will be provided if an offer of employment is made.)*

Do you agree to authorize a background and reference check? Yes No

I acknowledge that a conditional offer of employment is contingent on my satisfactory completion of a physical examination. If the results of the physical examination indicate that I cannot physically perform the essential functions of the position I have been offered, with or without a reasonable accommodation, the conditional offer is revoked and I will no longer be considered a qualified candidate for employment. *(The proper consent and authorization forms will be provided if an offer of employment is made along with a physical exam form to be completed by your physician.)*

Do you agree to have a medical exam, done at **your expense**, with a physician of your choice? Yes No

I acknowledge that D&W Salvage, Inc. is committed to a drug and alcohol-free environment, and that as such, a conditional offer of employment is contingent on my satisfactory completion of a drug and alcohol screening. If the results of the drug and alcohol screening indicate that I have tested positive for alcohol or drugs of abuse, the conditional offer of employment will be revoked and I will no longer be considered a qualified candidate for employment. As a part of D&W Salvage's commitment to a drug and alcohol-free workplace, I am also aware that certain rules and procedures are involved, including the following: *"My pre-employment screening will include drug and alcohol testing. I understand that D&W Salvage, Inc. also has a "for cause" and random drug and alcohol testing program and that I would be subject to such testing if employed."*

Do you agree to authorize a pre-employment drug and alcohol screening? Yes No

I understand that this application for employment will be considered active for a period of time not to exceed 12 months.

I understand that employment at D&W Salvage, Inc. is "at will". Employees of D&W Salvage, Inc. are free to terminate employment at any time with or without reason or notice. Likewise, D&W Salvage, Inc. has the right to terminate employment at any time with or without reason or notice.

With my signature below, I certify that the information on this application is true, complete, and correct to the best of my knowledge. I understand that falsification, misleading, misrepresentation, or omission of any information submitted in connection with my application or interview, whether in this document or not, may result in the withdrawal of a job offer or, if hired, in termination.

Applicant's Signature

Date