CONCEPT MOLDS 12273 North US-131 Schoolcraft, MI 49087

Application for Employment

Caplugs/Mokon/Medbio (the "Company") is an equal opportunity employer. We consider applicants for all positions without regard to age, race, creed, color, national origin, gender, disability, marital status or any other legally protected status pursuant to relevant federal, state and local laws.

	PLEASE PRINT		
Name:	First)	(Middle)	
Address:	(City) (Sta	nte) (Zip Code)	
Telephone: ()	Email Address		
Position(s) Applied for:	Date of Application:	/ /	
Type of employment desired:	ne 🗆 Part-time 🗆 Temporary 🔲	Internship	
Shift(s) Preferred:	Salary Desired: \$		
On what date would you be available for work?	/ /		
How were you referred to us? Employee Government Employment Relative Private Employment Ag Social Media/ Website - Source State name(s) of any relative already employed by the O	ency Walk-in Other:		
Have you ever been employed by the Company before? If Yes, give dates:		□ Yes □	∃ No
Are you at least 18 years of age?		□ Yes □] No
Are you legally authorized to work in the United States Proof of legal right to work in the United States will be		□ Yes □	∃ No
Do you now, or will you in the future, require immigrat	tion sponsorship for work authorization (e.g., H	H-1B)? □ Yes □] No
Are you currently employed?		□ Yes □	□ No
If yes, may we contact your current employer?		□ Yes □	∃ No
Will you work overtime if the job requires it?		□ Yes □	🗆 No

Employment History

Provide the following information of your past and current employers, starting with the most recent. If you need additional space, please continue on a separate sheet of paper.

Employer	Dates Employed	
Address	From	То
Telephone		
Job Title Supervisor	Summarize the Type of Work Performed and Job Responsibilities	
Reason for Leaving	-	

Employer	Dates Employed		
Address	From	То	
Telephone			
Job Title	Summarize the Type of Work Performed and Job Responsibilities		
Supervisor			
Reason for Leaving			

Employer	Dates Employed		
Address	From	То	
Telephone			
Job Title Supervisor	Summarize the Type of Work Performed and Job Responsibilities		
Reason for Leaving			

References

List name and telephone number of two business/work references who are *not* related to you and not previous supervisors.

1._

(Name)

(Telephone #)

2.____

(Telephone #)

Education

Name(s) of Schools attended	Location	No. of Years Completed	Subject	Diploma/Degree

Additional Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the Company must be true, complete and correct.

I expressly authorize the Company, its representatives, employees or agents to contact and obtain information from all references, employers, and educational institutions identified in this application and to verify the accuracy of all information provided by me during the hiring process. I authorize all references, employers and educational institutions to disclose to the Company any and all information in their possession about me, my employment history and educational background. I hereby waive any and all rights and claims I may have against the Company, representatives, employees, or agents, for obtaining and using such information in the employment process, and any rights and claims I may have against any other persons, corporations or organizations for furnishing such information about me.

Michigan applicants only: I understand that under Michigan's Bullard-Plawecki Employee-Right-To-Know Act I am entitled to notice of the release of information from my personnel record, and I hereby specifically waive any such notice from any prior employer.

I understand that I may be subject to a pre-employment background check after receiving a conditional offer of employment to investigate my criminal background and other matters related to my suitability for employment. I understand that any criminal background I may have will not necessarily cause the Company to rescind a conditional offer of employment, unless the offense is directly related to the job or the company concludes that hiring would involve an unreasonable risk to property or the welfare and safety of others. A separate disclosure and consent form will be provided to me prior to any background check.

I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Caplugs/Mokon/Medbio is of an "*at will*" nature, which means that, if I am hired, I am free to resign at any time, with or without cause, and without prior notice. Likewise, the Company reserves the same right to terminate my employment at any time, with or without cause and without prior notice.

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I also understand that any information provided by me on this application or during the pre-hire process that is found to be false or misrepresented in any respect will be sufficient cause to cancel further consideration of this application or immediately discharge me from employment with the Company whenever it is discovered.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement

Signature of Applicant:

Date:

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