

Application for Employment

ASV Holdings, Inc. considers applicants for employment without regard to race, color, creed, religion, sex, national origin, age, disability, veteran status or any other legally protected status. Equal access to programs, services, and employment is available to all persons. Applicants who require reasonable accommodation to complete the application and/or interview process should notify Human Resources.

This application will be given every consideration; however its receipt does not imply that the applicant will become employed.

The Company is committed to maintaining a workplace free of the problems associated with drug or alcohol abuse. As such, all applicants are required to undergo testing as part of the pre-employment process. A positive drug test will result in disqualification from employment or withdrawal of any employment offer.

In order to be considered for employment, this application must be completed in full. Please indicate the specific job title for which you are interested in being considered.

GENERAL INFORMATION				
NAME (First)	(Middle)	(Last)		
ADDRESS				
CITY	STATE	ZIP		
PHONE	E-MAIL			
Are you 18 years of age or older?	re you 18 years of age or older? If NO, please list date of birth:			
□ _{YES} □ _{NO}				
Are you legally authorized to work in the U.S.?				
□ _{YES} □ _{NO}				
Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status)? \square YES \square NO				
NOTE: New employees will be required to substantiate proof that they are eligible to work in the United States in compliance with the Immigration Reform and Control Act of 1986.				
What position are you applying for?				
What are your wage/salary expectations?				
Are you able to perform the essential functions of the position you are applying for (with or without reasonable accommodation)?				
Tres NO				
What type of employment are you applying for?				
□ _{FULL} -TIME □ _{PART} -TIME □ _{TEMP}				

What is your Availability?				
DAYS:	HOURS:	START DATE:		
US MILITARY EXPERIENCE	If YES, Branch of S	ervice? Rank/Type of Service:		
Date From:	Date To:	Special Training/Experience:		
List any skills you possess rel	evant to the job you are	applying for (i.e. technical skills, special training, certification, etc.):		
Please specify how you were referred to ASV:				
Have you ever worked or app any affiliated company?				
Do you know anyone employed at ASV or any affiliated If YES, specify name and relation: company? PYES NO				
If the position for which you are applying requires the operation of a motor vehicle, do you possess a current driver's license? $\square_{ m YES}$ $\square_{ m NO}$				
EDUCATION				
EDUCATION				
HIGH SCHOOL NAME & ADDRESS				
HIGH SCHOOL		Years Completed		
HIGH SCHOOL NAME & ADDRESS Area of Study? Did you Graduate?	□ Enrolled	Years Completed If so, Degree Received		
HIGH SCHOOL NAME & ADDRESS Area of Study? Did you Graduate?	□ Enrolled			
HIGH SCHOOL NAME & ADDRESS Area of Study? Did you Graduate? Pres No	Enrolled			
HIGH SCHOOL NAME & ADDRESS Area of Study? Did you Graduate? Pres No COLLEGE NAME & ADDRSS: Area of Study? Did you Graduate?	Enrolled	If so, Degree Received		
HIGH SCHOOL NAME & ADDRESS Area of Study? Did you Graduate? Pres No COLLEGE NAME & ADDRSS: Area of Study? Did you Graduate?	□ Enrolled	If so, Degree Received Years Completed		
HIGH SCHOOL NAME & ADDRESS Area of Study? Did you Graduate? Pres No COLLEGE NAME & ADDRSS: Area of Study? Did you Graduate? Pid you Graduate? Yes No	□ Enrolled	If so, Degree Received Years Completed		

EMPLOYMENT		
, , , ,	IF YES:	
□ _{YES} □ _{NO}	□ _{FULL} -TIME □ _{PART} -TIME	
PLEASE PROVIDE INFORMATION ON YOU	R LAST THREE EMPLOYMENT EXP	PERIENCES
EMPLOYMENT From: DATES		То:
COMPANY:		
Name:		Phone:
Street Address:		
City:	State:	Zip:
SUPERVISOR:		
Name/Title:		
Phone:	Email:	
POSITION:		
Title:	Starting Salary:	Ending Salary:
Description of Duties:		
Reason for Leaving:		
EMPLOYMENT From: DATES		То:
COMPANY:		
Name:		Phone:
Street Address:		
City:	State:	Zip:
SUPERVISOR:		
Name/Title:		
Phone:	Email:	
POSITION:		
Title:	Starting Salary:	Ending Salary:
Description of Duties:		

Reason for Leaving:				
EMPLOYN DATES	IENT From:		To:	
COMPANY	Y:			
Name:			Phone:	
Street Add	lress:			
City:		State:	Zip:	
SUPERVIS	SOR:			
Name/Title	2:			
Phone:		Email:		
POSITION	:			
Title:		Starting Salary:	Ending Sala	ıry:
Description	n of Duties:			
Reason for	r Leaving:			
Please exp	plain any gaps in employment:			
Have you e	ever been discharged or forced to resi	ign from any job?		
\square_{YES}	□ _{NO}			
If YES, plea	ase explain:			
SKILLS	ASSESSMENT			
Indicate the number of years of experience in the box next to each skill.				
Skilled Labor				
S	Surface Preparation	Carpenter		Read Blueprints
Ir	ndustrial Painting	Small Engine Mechanic		Laser
E	E-Coat Operator	Auto Mechanic		Brakeshear
G	Grinder	Diesel Mechanic		Shop Math
S	Saw Operator	Metric System		
Welder				
C	Certified	Robotic		Fitter-Welder

MIG	Welder's Gear	Other
TIG	Weld Symbols	
Tooling		
Tool Die	Precision Measuring	
Labor/Lt. Industrial		
Warehouse	Inventory Control	Other
Material Handling	Certified Forklift	
Shipping/Receiving	Truck Driver/CDL License	
Manufacturing		
Lean Manufacturing	RIP Workshops	Assembly
Machinist		
CNC Lathe	Setups	Punch Press
CNC Mill	Editing	Plasma Cutter
Manual Mill	Programming	
Manual Lathe	Drill Press	
Engineering		
AutoCAD	SolidWorks	
Safety Training/ Certification		
Haz Mat Training	CPR	
Clerical/Administrative		
MS Word	PowerPoint	10 Key
MS Excel	PageMaker	Type wpm
Outlook	AS 400	Access
Please summarize special skills, qualifications or experience, which make you suitable for the position you seek.		
REFERENCES		
Have you ever been known by another name? If YES, what name?		
Please advise us if there is any employer, including your present one, we should not contact:		

PLEASE LIST THREE PROFESSIONAL CONTACTS WHO CAN VERIFY YOUR QUALIFICATIONS FOR THIS POSITION			
Name:		Relationship:	
Positior		Phone:	
Organiz	ation Name & Address:		
Name:		Relationship:	
Positior	:	Phone:	
Organiz	ation Name & Address:		
Name:		Relationship:	
Positior	:	Phone:	
Organiz	ation Name & Address:		
APPL	CANT STATEMENT		
A. In consideration for the Company's review of this application, I authorize investigation of all statements contained in this application. My cooperation includes authorizing the Company to conduct a pre-employment drug screen and a consumer report that includes, but is not limited to a criminal history examination. Additionally, I authorize the Company, in consideration for the Company's review of this application, to supply my employment record, in whole or in part, and in confidence, to any prospective employer, government agency, or other party, with a legal or proper interest.			
B. As a candidate for employment, I realize that the Company requires information concerning my past work performance, background, and qualifications. Much of this information may only be supplied by my prior employers. In consideration for the Company evaluating my application, I request that the previous employers referenced above provide information to the Company's Human Resource representatives or designees concerning my work performance, my employment relationship, my qualifications, and my conduct while an employee of their organizations. Recognizing that this information is necessary for the Company to consider me for employment, I release these prior employers and waive any claims, which I may have against those employers for providing this information.			
C.	C. I understand that this application is not a contract, offer, or promise of employment and that if hired, I will be able to resign at any time for any reason. Likewise, the Company can terminate my employment at any time with or without cause, unless otherwise required by law. I further understand that no one other than the Human Resources Manager of ASV Holdings, Inc., or his/her pre-authorized designee, has the authority to enter into an employment contract or agreement with me, and that my at-will employment can be changed only by a written agreement signed by the Human Resources Manager of ASV Holdings, Inc.		
D.	D. In the event of my employment, I will comply with all rules and regulations as set forth in the Company's policy manuals, other communications distributed to employees and company procedures. I understand and agree that my employment is for no definite period and that failure to comply with these standards may result in my termination at any time and without any previous notice.		
E.	E. I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that misrepresentation or omission of facts will result in disgualification from further consideration for hire or for dismissal.		
F.	I hereby acknowledge that I have read the a	above statement and understand	the same.
Applica	nt's Signature:		Date: