



Please email completed application to [careers@qualservintl.com](mailto:careers@qualservintl.com)

APPLICATION FOR EMPLOYMENT		MANUFACTURING/WAREHOUSE	
Date:			
Applicant Name:			
Present Address:			
Street or P.O Box		City:	State:      Zip Code:
Telephone:		Social Security No.:	
Permanent Address (If different from present address):			
Are you 18 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever worked or attended school under another name? If so, under what name?			
Have you ever been convicted of a felony? * <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give details, including date(s): _____			
*A "yes" answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by applicable law. However, failure to disclose such information may result in disqualification of your application or termination or employment.			
<b>POSITION DESIRED</b>			
Position:		Date you can start:	Salary/Wage Requirement:
Do you prefer: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-Time		Hours available to work:	Days of week you are available to work:
If part-time, hours per week desired:		Are you available to work overtime: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you previously worked for this company? <input type="checkbox"/> Yes <input type="checkbox"/> No		If so, from: _____ to _____ What is your reason for Leaving:	
Former supervisor(s) at this company?			
Is anyone related to you employed by QualServ Corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please give their name and relationship to you.	
Referred by:			
<b>EDUCATION</b>			
High School:		Graduated? GPA:	Course of Study:
City:	State:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School:		Graduated? GPA:	Course of Study:
City:	State:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School:		Graduated? GPA:	Course of Study:
City:	State:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other Education or training:			
Other Special skills (i.e., computer skills, etc):			
<b>MILITARY EXPERIENCE</b>			
Branch of Service:		Dates Served:	Rank at Discharge:
Education and Training:			

**Have you ever had verifiable experience in?**

SKILL	HOW LONG	WHERE	SKILL	HOW LONG	WHERE	SKILL	HOW LONG	WHERE
Welding Stainless Steel			Carpentry			Automotive Painting		
Welding Mig/Tig			Cabinet Builder			Metal Finish		
Sheet Metal			Wood Saw Operator			Buffer Detail		
Set up Brake or Punch Press			Finish Painter Wood Cabinets			Metal Fabrication		
CNC			Electrician			Fiberglass		
Forklift/Palette Jack			Laminate			Upholstery		
Commercial Driver			CDL License					

For Driving Purposes Only:	Do you have a valid Driver's License?
Driver's License Type (Regular, Class E, CDL, etc.):	Driver's License Number:

**WORK EXPERIENCE**

Please list all previous employment beginning with the most recent. If you need more room, you may attach another sheet to paper.

Employer:	City/State:	Contact #: ( )
From: To:	Position Held:	Reason for Leaving:
Supervisor's Name & Title:	Phone #:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No

Description of Duties:

Starting Wage/Salary:	Final Wage/Salary:
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Employer:	City/State:	Contact #: ( )
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From: To:	Position Held:	Reason for Leaving:
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Supervisor's Name & Title:	Phone #:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Description of Duties:

Starting Wage/Salary:	Final Wage/Salary:
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Employer:	City/State:	Contact #: ( )
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From: To:	Position Held:	Reason for Leaving:
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Supervisor's Name & Title:	Phone #:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Description of Duties:

Starting Wage/Salary:	Final Wage/Salary:
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**CERTIFICATION (read carefully before signing)**  
QualServ is an equal opportunity employer

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on this application may be grounds for dismissal.

I authorize investigation of all statements contained in the application. I also grant permission to contact all references listed above and authorize them to release all information concerning my precious employment and any other pertinent information these references might have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you.

In consideration of my employment, I agree to conform to the rules and regulations of QualServ Solutions LLC, and I understand and agree my status of employment with QualServ Solutions LLC, is *AT-WILL*. If employed, I understand that: (1) My employment may be terminated by me or the company at any time, for any reason or no reason, with or without notice; (2) The company may revise and make exceptions to it policies, practices, handbooks, manuals, rules and regulations, in whole or in part at any time; and (3) unless agreed to in writing by the president of the company, no written or oral statements I receive from the company will change my status as an *AT-Will* employee.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

This assessment is only a diagnostic tool and is not the sole basis of selection for any position. The into-Mew process. Including work history, job skills and/or training are all considered when matching an applicant to an available position.

**WRITING**

The column on the left shows numbers in written form. Write these numbers in numeric form in the space provided to the right of the written numbers.

1. One Thousand Seven Hundred and Eight \_\_\_\_\_
2. Fifty-two Dollars and Forty-Seven Cents \_\_\_\_\_
3. Eleven Thousand and Five \_\_\_\_\_

**MATCHING**

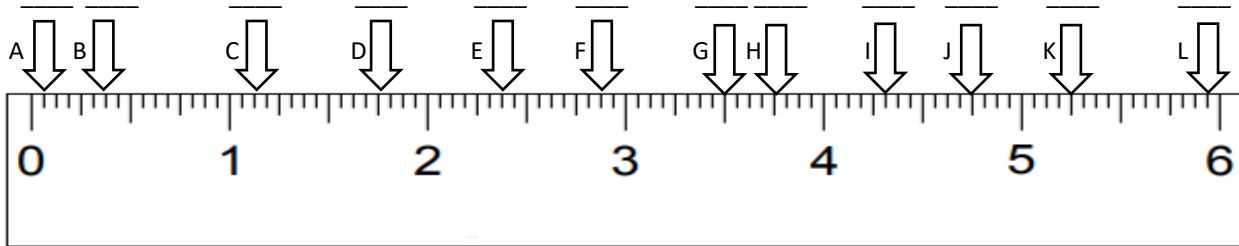
Compare the names/numbers in the left column to these in the right column. Place an "X" on the line between them if the name or number IS NOT THE SAME in both columns.

Penrith-Akers Mfg Co. \_\_\_\_\_  
 Bement-Cahill Co. \_\_\_\_\_  
 307 \_\_\_\_\_  
 4605 \_\_\_\_\_  
 63728 \_\_\_\_\_

Penrith-Akers Mfg. Co. \_\_\_\_\_  
 Bemant-Cahill Co. \_\_\_\_\_  
 309 \_\_\_\_\_  
 4506 \_\_\_\_\_  
 63728 \_\_\_\_\_

**MEASURING**

Determine the measurement for each letter A through L on the tape measure below. Write your answers in the space above the tape measure.



**MATH/COUNTING**

Find the solutions to the basic math problem.

- (1)  $92 - 67 =$  \_\_\_\_\_ (2)  $42 + 34 =$  \_\_\_\_\_ (3)  $21 \times 9 =$  \_\_\_\_\_ (4)  $5 \div 25 =$  \_\_\_\_\_ (5)  $\frac{1}{2} + \frac{1}{4} =$  \_\_\_\_\_ (6)  $\frac{3}{16} - \frac{1}{8} =$  \_\_\_\_\_

Below is an example of some math calculations you might have to make in the shipping department. Please write in the correct answer.

- If there are 12 items in each carton and you have 12 cartons, what is the total item count? \_\_\_\_\_
- If you have 3 cartons to each case, then 12 cartons equal how many cases? \_\_\_\_\_
- If you have 6 items in each carton and 10 cartons to each case, then 1 case contains how many items? \_\_\_\_\_
- If there are 10 cartons to each case, and 4 cases make 1 load, then 40 cartons will make how many loads? \_\_\_\_\_



Arkansas Act 1474 Of 1999, the Quality of Hiring Act, enables employers to receive accurate and reliable job performance information about prospective employees. Under the act, current or former employers will be immune from any civil liability for either the disclosure of employment history, or any consequences that arise from the disclosure of employment history; unless generally the employee can prove that the information disclosed was false and the employer knew it was false. Now, employers may disclose the following information:

- Date and duration of employment
- Current pay rate and wage history a job description and duties
- The last written performance evaluation prepared before the date of the request
- Attendance information
- Results of drug and alcohol tests administered within one year before the request
- Threats of Violence, harassing acts, or threatening behavior related to the workplace or directed at another employee
- Whether the employee was voluntarily or involuntary separated from employment and the reasons for the separation
- Whether the employee is eligible for rehire

I, \_\_\_\_\_ give consent to all prior employers to provide information with regard to  
(Please print name)  
my employment with prior employers to QualServ Solutions.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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We at QualServ appreciate your interest in employment with us. Our efforts to review your application, please refrain for calling as this slows down the process. We will contact you if further information is necessary.