NHK Seating of America, INC.

The objective of NHK Seating is to operate a cost effective plant which provides outstanding service to our customers through a high quality product, just-in-time delivery and responsiveness to their needs.

We intend to achieve high levels of productivity through the effective utilization and integration of people, materials, equipment, and technology. We will treat our employees, customers, and suppliers with dignity and respect.

Our commitment to excellence requires the active involvement of all our employees in a safe work environment which emphasizes trust, employee, and organizational growth and development, sensitivity to individual needs and values, and our responsibilities as a member of the community.

THIS APPLICATION WILL BE CURRENT FOR A PERIOD OF THREE MONTHS.

(If you wish to be considered for employment after this 3-month period, a new application must be completed.) THIS APPLICATION WILL NOT BE CONSIDERED UNLESS FULLY COMPLETED.

APPLICANTS ARE SUBJECT TO BE TESTED FOR ILLEGAL DRUGS.

DATE:							
	last,	f	ïrst,	middle in			
ADDRESS:	number	street	city	state	zip		
					:		
Positions a	applied for:						
Shift Avail	ability: 🗆	1 st □ 2 ND	□Any	Date you ca	n start:		
Are you wi	lling to wo	rk overtime	as required	l? 🗆 Yes	□ No		
Are you 18	or older?	🗆 Yes 🗆	No				
Do you hav	ve the lega	right to be	employed i	n the US?	🗆 Yes 🗆 No		
Were you 	previously	employed by	y us? 🛛 🗋	Yes 🗆 No	lf so, when?		
Have you e	ever been o	onvicted of	a crime, ot	her than mi	nor traffic offense	s? 🗆 Yes	□ No
If yes, plea	se explain						

Note: A prior conviction will not necessarily bar you from employment; however the type of conviction and when it occurred will be considered.

WORK HISTORY (TWO REQUIRED)

Describe your work experience beginning with your most recent job and include any military and volunteer experience. Please do not substitute with resume.

EMPLOYER:			P	HONE:	
STREET ADDRESS:					
CITY:			STATE:	ZIP:	
Dates Employed: From		То:		Salary:	
Describe the work you did:					
Reason for leaving:					
Supervisors Name and Job Title:					
May we contact for a reference? If no, why?					
EMPLOYER:			P	HONE:	
STREET ADDRESS:					
CITY:			STATE:	ZIP:	
Dates Employed: From Describe the work you did:				2	
Reason for leaving:					
Supervisors Name and Job Title: _					
May we contact for a reference?	🗆 Yes	□ No			
If no, why?					

ADDITIONAL WORK HISTORY (OPTIONAL)

Describe your work experience beginning with your most recent job and include any military and volunteer experience. Please do not substitute with resume.

EMPLOYER:		P	HONE:	
STREET ADDRESS:	 			
CITY:		STATE:	ZIP:	
Dates Employed: From	То:		Salary:	
Describe the work you did:	 			
Reason for leaving:				
Supervisors Name and Job Title:				
May we contact for a reference? If no, why?				
EMPLOYER:		P	HONE:	
STREET ADDRESS:				
CITY:				
Dates Employed: From Describe the work you did:			-	
 Reason for leaving:				
Supervisors Name and Job Title: _				
May we contact for a reference?	□ No			
If no, why?				

PLEASE READ THE FOLLOWING AND SIGN YOUR NAME TO IT BELOW

I hereby certify that the information I have presented in this application is true and complete. I understand that any omission, falsification, or misrepresentation of information contained on this application, related documents or oral interview when/if discovered, may result in my discharge or the refusal to consider me for employment.

I voluntarily authorize NHK Seating to make a thorough investigation of my past employment and verify the information I have provided to the Company, agree to cooperate in such investigation, and release from all liability or responsibility all persons, companies, or corporations supplying such information.

I also understand that (1) the Company has a Drug Free Workplace Policy that provides for preemployment testing as well as after employment; (2) consent to and compliance with such Policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such Policy. I further understand that should I accept the employment offered, employment may be based on the successful passing of a job-related physical examination, which may include drug screens, and such future physical examinations as may be required by the Company.

I agree to wear or use protective clothing or devices as required by the Company and to comply with all the rules and regulations as shall hereafter be made by the Company during my term of employment.

I understand that my employment at NHK Seating, should I be employed, is for no definite period and may be terminated by the Company or myself at any time for any reason. I acknowledge that no one has made a commitment to me otherwise and that no one in the Company is authorized to make such a commitment.

Applicant's	Signature
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_____ Date _____