



THERN, INC  
 5712 INDUSTRIAL PARK RD  
 PO BOX 347  
 WINONA, MN 55987  
 FAX 507-454-1255



## APPLICATION FOR EMPLOYMENT

Thern, Inc. is an equal opportunity employer. Applicants are considered for employment without regard to race, color, national origin, religion, gender, age, handicap, disability, citizenship status or any other basis prohibited by law. In addition, equal access to programs services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. The following is required in order to help us make the best possible placement within the Company. All portions of this application pertaining to you must be completed.

**NOTE: You CANNOT save data typed into this form**

**PLEASE PRINT COMPLETED FORM AND MAIL, FAX OR SCAN AND EMAIL TO: sue@thern.com**

Name	(Last)	(First)	(Middle)	Email Address
Address	(Street)			Telephone No.
	(City)	(State)	(Zip)	Alternate No.

Are you a U.S. Citizen or an alien legally entitled to work in the position(s) for which you have applied? \_\_\_ Yes \_\_\_ No

Are you 18 years of age or older? \_\_\_ Yes \_\_\_ No

How were you referred to the company? \_\_\_\_\_

Are you related to anyone now employed by the company-excluding your spouse? \_\_\_ Yes \_\_\_ No

If Yes, who? \_\_\_\_\_

Position for which you are applying: \_\_\_\_\_

Salary expected: \$ \_\_\_\_\_ Per \_\_\_\_\_

Other positions for which you would like to be considered: \_\_\_\_\_

Can you work overtime? \_\_\_ Yes \_\_\_ No

Can you work shifts? \_\_\_ Yes \_\_\_ First \_\_\_ No \_\_\_ Second

Are you on a layoff and subject to recall? \_\_\_ Yes \_\_\_ No

\_\_\_ Third

Are you a veteran of the U.S. Military? \_\_\_ Yes \_\_\_ No

If Yes, list branch: \_\_\_\_\_

Dates of service: \_\_\_\_\_

Rank: \_\_\_\_\_

If your application is considered favorably, on what date can you start work? \_\_\_\_\_

**EDUCATION**

	Name of School	City and State	Graduate		Number of Yrs Completed	Courses Pursued Degrees Granted
			Yes	No		
High School						
College						
Graduate						
Other						

Courses now studying: \_\_\_\_\_

**EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include military assignments and volunteer activities.

Employer	Dates Employed		Work Performed
	From	To	
Address			
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Reason for Leaving			

Employer	Dates Employed		Work Performed
	From	To	
Address			
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Reason for Leaving			

**EMPLOYMENT EXPERIENCE, Cont.**

Employer	<u>Dates Employed</u> From _____ To _____		Work Performed
Address			
Job Title	<u>Hourly Rate/Salary</u> Starting _____ Final _____		
Supervisor			
Reason for Leaving			

Employer	<u>Dates Employed</u> From _____ To _____		Work Performed
Address			
Job Title	<u>Hourly Rate/Salary</u> Starting _____ Final _____		
Supervisor			
Reason for Leaving			

Have you ever been discharged or asked to resign from any position? \_\_\_ Yes \_\_\_ No

If Yes, please state the employer and dates of employment: \_\_\_\_\_

**REFERENCES**

Give name, address and telephone of three references who are not related to you and are not previous employers.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**CLERICAL AND SECRETARIAL APPLICANTS ONLY** One (X) for knowledge. Two (XX) for experience.

\_\_\_ Calculating Machine      \_\_\_ Data Entry      \_\_\_ Typing      \_\_\_ W.P.M  
 \_\_\_ Dictating Equipment      \_\_\_ Switchboard      \_\_\_ Shorthand/Speedwriting      \_\_\_ W.P.M

List all software programs you are experienced in; (Word, Excel, etc.) \_\_\_\_\_

**FACTORY APPLICANTS ONLY**

List any shop equipment, machinery and inspection equipment you have the ability to operate:

\_\_\_\_\_

\_\_\_\_\_

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**PROFESSIONAL AND MANAGERIAL APPLICANTS ONLY**List special training or noteworthy achievements: \_\_\_\_\_  
\_\_\_\_\_

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**SALES APPLICANTS ONLY**

Territory Preferred	Why?	
Are you willing to relocate? ___ Yes      ___ No	What State?	Limitations:

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**APPLICANT'S STATEMENT**Please indicate that you have read and that you understand each paragraph of the Applicant's Statement  
By placing your initials beside each paragraph.

\_\_\_ I certify that this application was completed by me and that all entries in it and all information in it are TRUE and COMPLETE to the best of my knowledge. In the event of employment, I understand that false, misleading, or omitted information in my application may result in discharge.

\_\_\_ I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision. In making this application for employment, I understand that an investigation may be made and information may be obtained through interviews with the personal references, past employers, and other sources. This inquiry may include information as to my characteristics, as well as information about my work performance and workplace conduct. I consent to this investigation and to the consideration of any statements or references of former employers that are given in response to the inquiry.

\_\_\_ I hereby release all parties, including but not limited to Thern, Inc., personal references, and previous employers from any and all liability for any injury or damage that may result from their furnishing information to Thern, Inc. concerning me or any action Thern, Inc. takes on the basis of such information.

\_\_\_ I understand that if I am offered a job, as a condition of beginning my employment, I may be required to undergo a physical examination and/or drug screen and I hereby authorize any doctor, hospital, clinic, laboratory or other medical facility to furnish and medical information with reference to me as may be necessary in conjunction with that examination and related considerations.

\_\_\_ I understand that, according to federal law, all individuals who are hired must, as a condition of employment, produce certain documentation to verify and identify their United States citizen status or, if aliens, their legal authorization to work in the United States. As a consequence, I understand that any offer of employment to me by Thern, Inc. is contingent upon my ability to produce the required documentation within the time period required by law.

\_\_\_ I understand that this application is not, and is not intended to be, a contract of employment and that any resulting employment relationship is for no fixed period of time and is terminable at any time and for any reason by Thern, Inc. or by me. I further understand that statements which may be contained in policies, practices, handbooks, or other Company material do not create any guarantee of employment and that Thern, Inc. has the right to modify, amend, or terminate policies, practices, benefit plans, or other programs within the limits and the requirements by law. I understand that no representative of Thern, Inc. other than an officer, has the authority to enter into any agreement for any specific period of time or to make any agreement contrary to the foregoing and that any such agreement must be in writing to be binding on Thern, Inc.

\_\_\_\_\_  
Date\_\_\_\_\_  
Signature of Applicant**FOR OFFICE USE ONLY**Position Title: \_\_\_\_\_  
Salary: Annual \_\_\_\_\_ Weekly \_\_\_\_\_  
Department: \_\_\_\_\_  
Recommended by: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Manager: \_\_\_\_\_ Date: \_\_\_\_\_Date Employed: \_\_\_\_\_  
Job Code: \_\_\_\_\_  
Grade: \_\_\_\_\_  
Review Date: \_\_\_\_\_  
Range: \_\_\_\_\_ Mid: \_\_\_\_\_  
Approved by: \_\_\_\_\_  
Personnel: \_\_\_\_\_ Date: \_\_\_\_\_



**THERN, INC. COMPANY  
AFFIRMATIVE ACTION  
VOLUNTARY INFORMATION**



**COMPLETION OF INFORMATION BELOW IS VOLUNTARY**

We consider all applicants for positions without regard to race, color, religion, sex, national origin, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

This form is for Thern's Affirmative Action Program and is to be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

In an effort to comply with requirements regarding government record keeping, reporting, and other legal obligations which may apply, we invite you to complete this applicant survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is *not* a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

Position applied for \_\_\_\_\_ Date \_\_\_\_\_

**Referral Source**  Walk-In  Employee\*  Relative\*  Other\* \*NAME \_\_\_\_\_  
 Advertisement  Radio  Newspaper  
 Government Employment Agency (MN Workforce Center, etc.)  Private Placement Agency (Express, Manpower, etc.)  
 School (Name) \_\_\_\_\_  Career Fair (Name) \_\_\_\_\_  
 Thern Website  Other Website (List) \_\_\_\_\_  Tradeshow"

**APPLICANT INFORMATION**

Name \_\_\_\_\_ Telephone \_\_\_\_\_  
 Last First Middle

Address \_\_\_\_\_  
 Street City State Zip Code

Male  Female

**Please check one of the following Equal Employment Opportunity Identification Groups:**

White (not of Hispanic origin)  Black or African American  Hispanic or Latino (white only)  
 American Indian/Alaskan Native  Asian  Hispanic or Latino (all races other than white)  
 Native Hawaiian or Other Pacific Islander

**For Administrative Use Only**

Position applied for:  Available  Not Available

Other positions considered for: \_\_\_\_\_

Hired  Yes  No

Position Hired for \_\_\_\_\_ Date of Hire \_\_\_\_\_

From the EEO Job Classifications listed below, which one best describes the position filled?

<input type="checkbox"/> Officials & Managers	<input type="checkbox"/> Sales Workers	<input type="checkbox"/> Operatives (semi-skilled)
<input type="checkbox"/> Professionals	<input type="checkbox"/> Office & Clerical Workers	<input type="checkbox"/> Laborers (unskilled)
<input type="checkbox"/> Technicians	<input type="checkbox"/> Craft Workers (skilled)	<input type="checkbox"/> Service Workers

Notes \_\_\_\_\_

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Completed By \_\_\_\_\_ Date \_\_\_\_\_

**Definitions:**

**American Indian or Alaskan Native** – A person having origins in any of the original peoples of North American and South American (including Central American), and who maintains tribal affiliation or community attachment.

**Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

**Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**Black or African American** – A person having origins in any of the Black racial groups of Africa. Terms such as “Haitian” or “Negro” can be us in addition to “Black or African American”.

**White** – A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

**Hispanic or Latino (All races)** – A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

**Hispanic or Latino (White Race only)** – A person of Mexican Puerto Rican, Cuban Central or South American, or other Spanish culture or origin, and of the White race.

**Hispanic or Latino (All other races)** - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of any race other than White.

Definitions from <https://eosurvey.dol.gov/survey/InstructionB.asp> 6/01/2001

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SHOP APPLICANTS ONLY



TOOLS / MACHINES  EQUIPMENT	OPERATED			NOTES
	YES	NO	# YRS EXPERIENCE	COMMENTS

ELECTRICAL TESTING EQUIP	Explain Overall Level of Experience			
DVM				
AMPROBE				
WIRE MOTOR CONTROLS				

MATERIAL HANDLING EQUIP	Explain Overall Level of Experience			
Overhead Chain Hoists - 1/2T				
Overhead Bridge Crane - 10T				
Hydraulic Floor Cranes				
Hydraulic Lift Tables				
Pallet Jacks				
Electric Forklifts				
Slings				
Lifting Chains				

HAND TOOLS	Explain Overall Level of Experience			
Basic Hammer, Wrenches, etc				
Hand Drills				
Hand Grinders				
Torque Wrenches				

AIR TOOLS	Explain Overall Level of Experience			
Air Impact Wrenches				
Air Testing Devices				

WELDERS	Explain Overall Level of Experience			
Wire Feed Welders				
Automatic Welders				
MIG / TIG				
Any Certifications				
List Different Positions				

MACHINES	Explain Overall Level of Experience			
Bridgeports				
Radial Arm Drills				
No.5 Warner and Swassey Lathe				
Manual Engine Lathes				
Drill Presses				
Blanchard Grinder				
25 Ton Hydraulic Presses				

<b>CNC PROGRAMMING</b>	<b>Explain Overall Level of Experience &amp; Complexity</b>			
Can write G-Code Programs				
Write Conversational Programming				

<b>CNC TURNING CENTERS</b>	<b>Explain Overall Level of Experience</b>			
Okuma Lathe				
Cincinnati Milacron Lathe				

<b>CNC MACHINING CENTERS</b>	<b>Explain Overall Level of Experience</b>			
Okuma Vertical Machining Center				
Cincinnati Milacron Horizontal Mazak				

<b>CNC CUTTING CENTER</b>	<b>Explain Overall Level of Experience</b>			
Burney Control Plasma Table				

<b>MANUAL MACHINES</b>	<b>Explain Overall Level of Experience</b>			
Double Column Planer Mill				
Tacki Lathe				

<b>PAINTING SYSTEM</b>	<b>Explain Overall Level of Experience</b>			
HVLP Spray - Enamel / Epoxy				
Spray Booth				

<b>DEBURRING SYSTEM</b>	<b>Explain Overall Level of Experience</b>			
Ceramic Media Tumbler				

<b>CLEANING SYSTEM</b>	<b>Explain Overall Level of Experience</b>			
Hot Phosphate Dip/Coat Tank				

<b>SAW SYSTEM</b>	<b>Explain Overall Level of Experience</b>			
Vertical Ban Saw				
Horizontal Ban Saw				

<b>OTHER TOOLS OR MACHINES</b>				
<b>PLEASE LIST</b>				