QUALITY • SERVICE • RESULTS

ACTION FABRICATING INC.
MINNESOTA METALWORKS INC.

Fill out the below application and e-mail the completed form to employment@afi-mmi.com.

APPLICANT INFORMATION

Last Name		First		M.I.		Date	
Street Address				Apartment/Unit #			
City		State		ZIP			
Phone		E-mail Address					
Date Available		Social Security No.		Desired Salary			
Position Applied for							
Shift Desired	Full Time		Part Time		1st Shift		2nd Shift		3rd Shift	
			Are you authorized to work in the U.S.?		YES	NO
Have you ever worked for this company?		YES	NO	If so, when?			

EDUCATION

High School				Address				
From		To		Did you graduate?	YES	NO	Degree	
College				Address				
From		To		Did you graduate?	YES	NO	Degree	
Other				Address				
From		To		Did you graduate?	YES	NO	Degree	

Special Skills or Abilities:

REFERENCES

Please list three professional references.

Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			

Full Name		Relationship	
Company		Phone	
Address			

PREVIOUS EMPLOYMENT

Company		Phone
Address		Supervisor
Job Title		
Responsibilities		
From To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES ☐ NO ☐		
Company		Phone
Address		Supervisor
Job Title		
Responsibilities		
From To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES ☐ NO ☐		
Company		Phone
Address		Supervisor
Job Title		
Responsibilities		
From To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES ☐ NO ☐		

MILITARY SERVICE

Branch	From To
Rank at Discharge	

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature Date