

THE SCHNEIDER CORPORATION



Indianapolis: 8901 Otis Avenue, Indianapolis, IN 46216 [317.826.7100]
West Lafayette: 1330 Win Hentschel Blvd., Suite 260, West Lafayette, IN 47906 [765.448.4156]
Charlotte: 8307 University Executive Park Drive, Suite 220, Charlotte, NC 28262 [704.697.5900]
Ankeny: 1705 North Ankeny Boulevard, Ankeny, IA 50023 [515.233.3311]
DeLand: 120½ West New York Avenue, DeLand, FL 32720 [386.734.1954]

We offer a non-smoking environment. Smoking is prohibited at all Schneider locations. Employment will be contingent on successful completion of a pre-employment drug screen.

Equal Opportunity Employer

(All applicants will receive consideration without discrimination due to race, creed, religion, color, sex, age, national origin, sexual orientation, or any other protected characteristic.)

DATE: _____

LAST NAME FIRST NAME MIDDLE INITIAL

PRESENT ADDRESS CITY STATE ZIP

PREVIOUS ADDRESS CITY STATE ZIP

HOME TELEPHONE MESSAGE TELEPHONE

Are you legally eligible for employment within the United States? Yes No
(Proof of eligibility to work in the United States will be required upon employment.)

Position(s) desired: _____

Currently employed? _____ Date available for work: _____

Are you available for work: Full Time? Part Time? Temporary?

Will you work overtime, if needed? Yes No Have you ever been employed with us? Yes No

If yes, from _____ To _____ Supervisor's name: _____

How were you referred to our organization? _____

If at anytime you are required to drive a company vehicle, are you aware of any reason that would make you uninsurable under our company insurance policy (i.e. numerous traffic violations, DWI in the last 5 years, etc.)?

Yes No If yes, please explain. _____

Have you ever been convicted of a felony that has not been expunged by a court? (This will not preclude you from future employment.)

Yes No If yes, please explain. _____

MILITARY EXPERIENCE:

BRANCH OF SERVICE	DATES SERVED	RANK AT DISCHARGE
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EDUCATION AND TRAINING:

EDUCATION	High School	College/ University	Technical Training	Graduate School
School Name & Location				
Years Completed	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
Diploma/Degree				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills, and extra-curricular activities.				
Describe any honors you received.				

PROFESSIONAL CERTIFICATIONS:

SKILLS AND QUALIFICATIONS:

Summarize special job-related skills and qualifications acquired from employment or other experience.

WORK EXPERIENCE:

(List all previous employment, beginning with the most recent and all volunteer experience activities.)

1.	EMPLOYER		DATES EMPLOYED		DUTIES
			FROM	TO	
	ADDRESS				
	TELEPHONE NUMBERS:				
	JOB TITLE	SUPERVISOR	MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	SALARY	
REASON FOR LEAVING					

2.	EMPLOYER		DATES EMPLOYED		DUTIES
			FROM	TO	
	ADDRESS				
	TELEPHONE NUMBERS:				
	JOB TITLE	SUPERVISOR	MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	SALARY	
REASON FOR LEAVING					

3.	EMPLOYER		DATES EMPLOYED		DUTIES
			FROM	TO	
	ADDRESS				
	TELEPHONE NUMBERS:				
	JOB TITLE	SUPERVISOR	MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	SALARY	
REASON FOR LEAVING					

If you need additional space, please continue on a separate sheet of paper.

State any additional information you feel may be helpful to us in considering your application.

PLEASE READ CAREFULLY
AUTHORIZATIONS, ACKNOWLEDGMENTS, DISCLAIMERS AND WAIVERS

I verify that these answers are true and complete to the best of my knowledge. The Schneider Corporation ("the Company") may investigate all statements contained in the application, and I understand that any false or misleading information provided during the application or interview process will result in withdrawal from consideration for employment (or my immediate discharge if I am hired), regardless of when discovered. I authorize the Company or its agents to confirm all statements contained in this application and/or resume to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I hereby release, discharge and hold harmless, to the extent permitted by federal, state, and local law, any party delivering background information to the Company or its duly authorized representative from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such background information and all other persons, corporations, organizations furnishing such information.

I understand that this application is not a contract of employment. I also understand that if hired, regardless of any oral representation to the contrary, the employment relationship between me and the Company is terminable at will so that both the Company and I remain free to choose to end our work relationship at any time for any or no reason at all. Additionally, the President may change any terms or conditions of employment in writing at anytime.

I also understand any offer of employment will be contingent on a pre-employment drug screen.

I authorize the Company to supply my employment record, in its sole discretion, in whole or in part, to any prospective employer, government agency, or other party, with an interest that the Company deems appropriate.

I understand that this Application will be considered active for thirty (30) days following submission. I further understand that if The Schneider Corporation does not act favorably upon this Application within that time period, it will be necessary for me to renew my interest by completing another Application for Employment.

Applicant's Signature

Date