



Pro Products Inc.
 1450 S. Neenah Ave.
 Sturgeon Bay, WI 54235
 (920)-743-1575

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion, or national origin.

EMPLOYMENT APPLICATION			
APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address			
City	State	ZIP	
Phone	Alt. Phone		
Date Available			Desired Wage
Position Applying for			
Are you a citizen of the United States?			
Are you 18 years of age or older?			
Have you ever applied to this company?		If so, when?	
Have you ever been convicted of a felony?		If yes, explain.	
Do you have a valid WI driver's license?			
EDUCATION			
High School		Address	
From	To	Did you graduate?	
College		Address	
From	To	Did you graduate?	
Courses of Study?			
Other		Address	
From	To	Did you graduate?	
REFERENCES Please only list professional references.			
Full Name		Relationship	
Company		Phone	Years Known
Full Name		Relationship	
Company		Phone	Years Known
Full Name		Relationship	
Company		Phone	Years Known
Did an employee of Pro Products Inc. refer you to this job? If yes, please state their name.			
If not, how did you know we were taking applications?			

PREVIOUS EMPLOYMENT Please begin with the most recent or current job.

Company		Phone
Job Title		Supervisor
Wage/Salary	Responsibilities	
From	To	Reason For Leaving
May we contact your previous supervisor for a reference?		
Company		Phone
Job Title		Supervisor
Wage/Salary	Responsibilities	
From	To	Reason For Leaving
May we contact your previous supervisor for a reference?		
Company		Phone
Job Title		Supervisor
Wage/Salary	Responsibilities	
From	To	Reason For Leaving
May we contact your previous supervisor for a reference?		

EXPERIENCE

List Machines you have operated.
Please list measuring equipment you have used.
Special Skills?

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. I understand that this application will be active for a period of 60 days, after that time, If I wish to be considered for employment I must submit a new application

Drug Policy Agreement:

Pro Products Inc. is committed to protecting the safety, health and well being of all employees as well as other individuals in our workplace. I understand that as a condition of employment I may be required to participate in pre-employment, post-accident, reasonable suspicion and follow-up testing upon selection or request of management.

Signature:	Date:
Office use only.	