



# APPLICATION FOR EMPLOYMENT AT:

Equal Opportunity /  
Affirmative Action  
Employer

Capitol Aluminum and Glass Corporation 1276 W. Main St., Bellevue, OH 44811

**Email applications to [hr@capitol-windows.com](mailto:hr@capitol-windows.com)**

Minorities, women, and veterans are strongly encouraged to apply. Applicants that require reasonable accommodations in completing the application and/or interview process should notify the Human Resources Department.

## GENERAL INFORMATION

Last Name		First Name		Middle Initial	Home Telephone
Current Address		City	State	Zip	Other Telephone
E-Mail Address (If applicable)			Are you legally entitled to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted of a felony?			Do you have a means of transportation to come to work on time every day?		

## POSITION

<b>Position Or Type Of Employment Desired</b> <input type="checkbox"/> Estimator <input type="checkbox"/> Sales/CSR <input type="checkbox"/> Machinist <input type="checkbox"/> Administrative <input type="checkbox"/> Production Dept. Supervisor <input type="checkbox"/> Product Engineering/CAD <input type="checkbox"/> Field Engineering /CAD <input type="checkbox"/> Fabricator <input type="checkbox"/> Field Installer <input type="checkbox"/> Other _____				<b>Will Accept:</b> <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary	<b>Shift:</b> <input type="checkbox"/> Days <input type="checkbox"/> Weekend (If Necessary)
Have you ever been employed here before?		Do you know anyone who works here? If so, Who?			
Salary Desired		Date Available To Start Work			
How did you find out about this position? Advertisement – which newspaper/online search engine? Person – Who?					

## EDUCATION AND TRAINING

High School Graduate Or General Education (GED) Test Passed? <input type="checkbox"/> Yes <input type="checkbox"/> No				
College, Business School, Military, Trade School (Most recent first)				
Name and Location	Dates Attended Month/Year	Did you Graduate?	Degree/Major or Subject Received & Year	
	From _____ To _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	From _____ To _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	From _____ To _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	From _____ To _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Occupational License, Certificate or Registration		Number	Where Issued	Expiration Date
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\*\* We participate in the Ohio Bureau of Worker's Compensation Drug Free Workplace Program. As a member company, all candidates for employment with Capitol Aluminum & Glass Corp. will be required to submit to Post offer- pre-employment Drug Testing. Any employment is contingent upon the results. Candidates may be subject to a background check.

**VETERAN INFORMATION (Most recent)**

Branch of Service & Location (City & State)	Rank	Years of Service
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**WORK EXPERIENCE (Most Recent First) (Include voluntary work and military experience)**

Employer	Telephone Number	From (Month/Year)
Address		
Job Title	Number of Employees	To (Month/Year)
List Specific Job Duties & Any Special Training Acquired		Hours Per Week
		Last Salary
		Supervisor
		Reason For Leaving
Employer	Telephone Number	From (Month/Year)
Address		
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**SPECIAL SKILLS (Fill in only years of experience that apply)**

Material Handling Equipment Operator	Yrs. Experience
Cranes & Hoists	
Forklifts Mechanical Loaders	
Pallet Movers	
Other (List)	

Computer Numeric Control	Yrs. Experience
CNC	
Operator	
Programmer	

Light Assembly or Fabrication	Yrs. Experience
Ultrasonic Welder	
Spot Welder	
Laser	
Power Tools	
Screws or Nut Drivers	
Saws	
Drills	
Drill Presses	
Metal Products	

Quality Control	Yrs. Experience
Micrometers, Calipers	
List any Testing equipment:	

Maintenance	Yrs. Experience
Machining	
Millwright	
Tool & Die	
Electrical	
Machine repair or recondition	
Other (List)	

Construction	Yrs. Experience
Framing, Roofing, Siding, Doors, Windows	
Commercial	
Residential	

Supervision or Team Leader
How many people were you responsible for?

Previous Job Titles Held	Yrs. Experience
Manufacturing Sales Rep.	
Retail Sales	
Construction	
Sales Rep	
Estimator	
Project Manager	
Accounts Representative	
Customer Service Representative (CSR)	
Administrative Assistant	
Sales Manager	
Marketing	

Officer, Manager, or Leader
How many people were you responsible for?

Skills Rate from 0-5 (0 = None, 5 = Very Skilled)	Rate
Understand Blueprints	
Understand Measurements to 1/16"	
Understand Counting	
Reading and Writing	
Listening	
Work with co-workers	
Work with supervision	
Work without supervision	
Technical writing	
Knowledge of construction	
Computer skills	
Windows XP or 7	
Microsoft Word	
Microsoft Excel	
Microsoft Outlook	
Database, List:	
AutoCAD	
Other drafting program, List:	
Accounting/Payroll	
Manufacturing software, List:	
Other:	

List any additional skills and/or equipment that you can operate

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**IF YOU ARE APPLYING FOR PRODUCTION POSITION (Other positions may require more or less demands)**

**PHYSICAL DEMANDS**

STAND	CONSTANTLY
WALK	CONSTANTLY
SIT	OCCASIONALLY
HANDLING/FINGERING	CONSTANTLY
REACH OUTWARD	CONSTANTLY
REACH ABOVE SHOULDER	FREQUENTLY
CLIMB	OCCASIONALLY
SQUAT OR KNEEL	FREQUENTLY
BEND	CONSTANTLY

**LIFT/CARRY**

10 LBS OR LESS	CONSTANTLY
11-20 LBS	CONSTANTLY
21-50 LBS	FREQUENTLY
51-100 LBS	OCCASIONALLY WITH HELP
OVER 100 LBS	NOT APPLICABLE

**PUSH/PULL**

12 LBS OR LESS	CONSTANTLY
26-40 LBS	FREQUENTLY
41-100 LBS	OCCASIONALLY

**OTHER PHYSICAL REQUIREMENTS**

- Vision: Need to be able to see: near, distance, colors, peripheral, depth perception
- Sense of Sound: Hear equipment operations, co-workers, assignments, instructions, and warnings
- Ability to Wear PPE (Personal Protective Equipment): Hard Hats, specialty gear (if required, i.e.: sleeves, gloves, glass handling PPE, safety glasses)
- Skillfully use hand tools
- Measure, cut, and work with great accuracy
- Use eyes, hands, and fingers to operate equipments
- Lift, carry, push/pull work materials
- Be able to visualize finished products

**WORK-RELATED REFERENCES**

(List up to 3 professional references you have worked with or knows your work experience)

<b>Name</b>	<b>Business</b>	<b>Phone</b>	<b>Years Known</b>
<b>Address</b>			
<b>Name</b>	<b>Business</b>	<b>Phone</b>	<b>Years Known</b>
<b>Address</b>			
<b>Name</b>	<b>Business</b>	<b>Phone</b>	<b>Years Known</b>
<b>Address</b>			

CAPITOL ALUMINUM & GLASS CORP. relies upon the accuracy of information in the employment application, as well as the accuracy of other data presented throughout the hiring process and employment. Any misrepresentations; falsification; or material omissions in any of this information or data may result in CAPITOL ALUMINUM & GLASS CORP's exclusion of the individual from further consideration for employment (or, if the person has been hired, immediate termination of employment will result. To ensure that individuals who join CAPITOL ALUMINUM & GLASS CORP are well qualified and have a strong potential to be productive and successful, it is the policy of CAPITOL ALUMINUM & GLASS CORP. to verify the information & check references.

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**PRE-EMPLOYMENT QUESTIONNAIRE**

All pre-employment questions must be completed in order to be considered for employment.

List all of you interests and skills that apply to the job description.

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What type of things in a job interest you most?

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Describe your ideal work environment.

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Explain why Capitol should select you for an interview.

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I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal.

Capitol has a 90 day probationary period for all new hires. Eligibility for benefits is not available until after completion of 90 days of employment.

I expressly authorize, without reservation, Capitol Aluminum and Glass Corp., it's representatives, employees, or agents to contact and obtain information from all references, employers, public agencies, licensing authorities, education institutions and to otherwise verify the accuracy of all information provided by me in this application.

I hereby waive any and all rights and claims I may have regarding the employer, its representatives, employees, or agents for seeking, gathering, and using such information in the employment process and all persons furnishing information about me.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Interviewer's Comments:

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