



2nd Chance Pallets Application For Employment

We are an Equal Opportunity Employer and committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name

DATE:

Address	City	State	Zip
---------	------	-------	-----

Phone number	Email address
--------------	---------------

Are you legally eligible to work in the US? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you a veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>
---	--

If selected for employment are you willing to submit to a background check?
Yes No

Position

Position you are applying for	Available start date	Desired pay
-------------------------------	----------------------	-------------

Employment desired

Full time Part time Seasonal/Temporary

Education

School name	Location	Years attended	Degree received	Major

References (business and professional only)

Name	Title	Company	Phone

Employment History (MOST RECENT FIRST)

Employer (1)	Job title		Dates employed
Work phone	Starting pay rate		Ending pay rate
Address	City	State	Zip
Employer (2)	Job title		Dates employed
Work phone	Starting pay rate		Ending pay rate
Address	City	State	Zip
Employer (3)	Job title		Dates employed
Work phone	Starting pay rate		Ending pay rate
Address	City	State	Zip

Have you been convicted of a felony or misdemeanor?

- Yes
 No

Do you have a court case pending?

- Yes
 No

Are you on probation/parole?

- Yes
 No

Signature Disclaimer

The information that you provide on this application is subject to verification. Falsifications or misrepresentations may disqualify you from consideration for employment or, if hired, may be grounds for termination later.

With my signature below (typed or written), I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I authorize all former employers to release job-related information they may have about me and I release all persons or companies from any liability or responsibility for providing such information. If hired, I acknowledge that I will be responsible for reimbursing 2CP, LLC for all costs incurred in the hiring process if I am terminated (voluntarily or involuntarily) prior to 90 days of employment.

Name (Print) _____

Signature _____

Date _____