Application For Employment

national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.						
	(PLEA	SE PRINT)				
Position(s) Applied For				Date of Applica	tion	
How Did You Learn About Us?						
☐ Advertisement	☐ Friend	☐ Walk-In				
☐ Employment Agency	☐ Relative	Other				
Last Name	First Name		Mid	dle Name	,	
Address Number	Street	City	s	itate	Zip Code	
Telephone Number(s)			Social Secur	ity Number		
If you are under 18 year proof of your eligibility t Have you ever filed an a	to work?		, , ,	☐ Yes	□ No	
		If Yes.	give date	•		
Have you ever been emp	loyed with us bef		8	☐ Yes	□ No	
		If Yes,	give date			
Are you currently employ	yed?		z.	☐ Yes	□ No	
May we contact your pre	esent employer?			☐ Yes	☐ No	
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Proof of citizenship or immigration status will be required upon employment.					□ No	
On what date would you	be available for v	work?		☐ Yes		
Are you available to worl] Shift W	ork 🗆 Ter	nporary	
Are you currently on "lay	v-off" status and s	ubject to recall?		☐ Yes	□ No	
Can you travel if a job requires it?					□ No	
Have you been convicted of a felony within the last 7 years? Conviction will not necessarily disqualify an applicant from employment.					□ No	
f Yes, please explain						
	Allendaria					

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

*** ***		Elementary School	High School	Undergraduate College / University	Graduate / Professional
School Name a	nd Location				
Years Co	mpleted	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma	/ Degree				
Describe Course	of Study				
Describe any sp training, appren skills and extra- activities	ticeship,				
Describe any honors you have received	,				
State any additi information you helpful to us in your application	feel may be considering				
]	ndicate ar	ıy foreign langua	iges you can spea	k, read and / or	write
	1	FLUENT	GOOD		FAIR
SPEAK					
READ					
WRITE					
	e membership		vic activities and ex, race, religion, nation		or handicap or other
Refer	ences		***		
you and are	not previ	ous employers.	mber of three ref		
2.			·		
3.					
			ning in the United	d States military	
f Yes, please	e describe		*******		
Are you phy are applying		otherwise unable	e to perform the		o for which you Yes \(\subseteq \text{No} \)

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

1.	Employer		Leng of Ser	th vice	Work Performed	
	Address		rr 1 5	-1-16-1		
	Telephone Number(s)		Hourly R. Starting	ate/Salary Final		
	Job Title	Supervisor	V. L. L. L.		1	
	Reason for Leaving					
2.	Employer		Leng of Ser		Work Performed	
	Address					
-	Telephone Number(s)		Hourly R.	ate/Salary Final		
	Job Title	Supervisor				
	Reason for Leaving					
3.	Employer		Leng of Ser	th vice	Work Performed	
	Address					
	Telephone Number(s)		Hourly R Starting	ate/Salary Final		
	Job Title	Supervisor				
	Reason for Leaving					
4.	Employer		Leng of Ser		Work Performed	
	Address	-				
	Telephone Number(s)	elephone Number(s)		ate/Salary Final		
	Job Title	Supervisor	Starting		*	
	Reason for Leaving				***************************************	
ļ	If you need a	additional space, p	lease continue	on a separ	ate sheet of paper.	
	·	•		·-		
	ecial Skills and Q					
Su	mmarize special job-re	elated skills and qualif	ications acquired	from employ	ment or other experience.	

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. The applicant understands that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that affect is executed by the employer and employee in writing. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. Signature of Applicant Date FOR PERSONNEL DEPARTMENT USE ONLY Remarks _ INTERVIEWER Employed

Yes

No Date of Employment ___ Hourly Rate/ Salary _ Department_ Ву ____ NAME AND TITLE NOTES This Application For Employment and Employment Data Record is sold for general use throughout the United States. Amsterdam Printing and Litho Corp. assumes no responsibility for the use of said form or any questions which, when asked by the employer of the job applicant, may violate State and/or Federal Law.