APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

	(PL)	EASE PRINT)			
Position(s) Applied For			Da	te of Application	DΤ
How Did You Learn About Us? Advertisement Employment Agency	Relative Friend	☐ Inquiry ☐ Other			
Last Name	First Name	area desire	Middle	Name	
Address Number	Street	City	State	: Zi	p Code
Telephone Number(s)			Social Security	Number (Voluz	ntary)
Best time to contact you at he	ome is:				AM PM
If you are under 18 years of a proof of your eligibility to wo		e required		□ Yes	□ No
Have you ever filed an applica	ation with us before	e?			□No
141111111111111111111111111111111111111	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	If Yes, give date			
Have you ever been employed	l with us before?	*******************************		🗆 Yes	□ No
If Yes, give date					
Do any of your friends or rela	tives, other than sp	oouse, work here?	*******************	🗆 Yes	□ No
Are you currently employed?					□ No
May we contact your present	employer?				□ No
Are you prevented from lawfu country because of Visa or Im Proof of citizenship or im	migration Status?		aployment	🗆 Yes	□ No
Date available for work/_	/ What is :	your desired salary ra	nge?		
Are you available to work:	☐ Full-Time	(please indicate 1	2 3 shift)		
	☐ Part-Time	(please indicate Mo	ornings Aftern	noon Eveni	ngs)
	☐ Temporary	(please indicate da	tes available	J/	_//)
Are you currently on "lay-off"	status and subject	to recall?	421247777777777777777	🗆 Yes	□ No
Can you travel if a job require	e it?			□ Vas	□ No

EDUCATION

	Name and Address of School	Course of Study	Number of Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

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, disabilities or other protected status.

1	Employer						
1.	Employer			imployed	Work Performed		
	Address		From	То			
	Telephone Number(s)		Hourly R	tate/Salary Final			
	Job Title	Supervisor		T HIGH			
	Reason for Leaving						
2.	Employer		Dates E	mployed To	Work Performed		
	Address						
	Telephone Number(s)		Hourly R Starting	ate/Salary Final			
	Job Title	Supervisor					
	Reason for Leaving						
3.	Employer		Dates E	mployed To	Work Performed		
	Address						
	Telephone Number(s)		Hourly R	ate/Salary Final			
	Job Title	Supervisor					
	Reason for Leaving			-			
4.	Employer		Dates E	mploved To	Work Performed		
	Address						
	Telephone Number(s)		Hourly R Starting	ate/Salary Final			
	Job Title	Supervisor					
	Reason for Leaving						
	If you need	additional space, plea	se continue o	n a separa	ate sheet of paper.		

List professional, trade, business or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:	r

ADDITIONAL INFORMATION

Other Qualifications			
Summarize special job-relati	ted skills and qualifica	ations acquired from em	aployment or other experience.
PECIALIZED SKILLS	(CHECK SKILLS/	EQUIPMENT OPERATI	ED)
Terminal	Spreadsheet	Production/Mobile Machinery (list)	Other (list)
PC/MAC	Word Processing	maciniciy (ust)	Other (us.)
Typewriter	Shorthand		
WPM	WPM		
ote to Applicants: DO NOT NFORMED ABOUT THE R	ANSWER THIS QUE	STION UNLESS YOU F	HAVE BEEN YOU ARE APPLYING.
Can you perform the essentia easonable accommodation?		, for which you are appl YESNO	lying, either with or without a
EFERENCES			
((Name)	(Phone #
•	(Address)		
•	(Name)	(Phone #
-	(Address)		
1	(Name)	(Phone #
·			ж дамеаам II
	(Address)		

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

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.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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.

	Edge of the College	THE RESERVE OF THE PARTY OF THE
Signature of Applicar	at	Date

		FOR P	ERSONNEL	DEPARTMENT U	ISE ONLY		
Arrange Inte Remarks	erview	□ Yes	□ No				
Employed	□Yes		Date of E	nployment	INTERVIEWER	DATE	
Job Title	By		urly Rate/ Salary	Department _			
	Бу		N	AME AND TITLE	DATE		

This Application For Employment is sold for general use throughout the United States. Amsterdam Printing and Litho 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.



FOR PERSONN	IEL DEPARTMENT USE ONLY
Position(s) Applied For Is Open:	☐ Yes ☐ No
Position(s) Considered For:	
	Date

POSITION:

NAME:

DATE: