- DOWNLOAD PDF DOCUMENT TO YOUR DESKTOP BY RIGHT-CLICKING AND SELECTING "SAVE AS..." OR THE CLICKING THE "SAVE DISK ICON" IN THE BOTTOM RIGHT CORNER.
- COMPLETE FORM WITH ADOBE READER OR ACROBAT.
- ONCE COMPLETED SUBMIT FORM VIA EMAIL TO fjohnston@duboisccci.com

Employment Application

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, use of lawful products during non-work hours and any other legally protected status.

		P	<u>PLEASE PRINT CL</u>	EARLY		
Position(s) Applied	ition(s) Applied For: Date of Application:					
How did you learn	about the co	ompany? (ci	rcle one)			
Advertisement	Friend	Walk-in	Recruiting Firm	Current Employee	Other:	
Last Name		First N	ame	Middle Name		
Address	Street		City	State	Zip	Code
Telephone numbe Home: ()	er(s) where w	e can conta Wo				
Are you available to	work (<i>circle</i>):	Regular, Fu	ıll-time Re	gular. Part-time	Tempo	orary
Which shift are you	available to w	ork (<i>circle</i>)?	1st Shift 2nd Sh	ift 3rd Shift	4	
On what date would	l you be availa	able to begin w	vorking?		£ .	
If you are under 18	years of age,	can you provi	de required proof of you	r eligibility to work?	Yes	No
Have you ever subr	• • •	cation with the	e company before?		Yes	No
If yes, please giv	ve date:					
Have you ever been		th the compar	ny before?		Yes	No
If yes, please giv	e date:					
Are you currently er	mployed?				Yes	No
May we contact you	ır authorized p	resent emplo	yer for references?		Yes	No
Are you legally qualified to work in the United States? (Proof of citizenship or immigration status will be required upon employment.)			No			
(F1001 01 Chizens	sinp or initingle	สมอก รเสเนร พ	ııı be requirea aport emi	oloyment.)		
In order to permit a you have used in	•	work and edu	ication records, please	ndicate any and all other na	mes	
Yes No			plea or nolo contendere	e plea) of a crime other than	a summary	offense?
	•	•	• •	currently in active status?	Yes	No
health education	loan or schola	arship?	•	program or defaulted on a	Yes	No
ıı yes, piease ex	pıaırı					

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EDUCATION					
	Elementary School	High School	Technical School	College	Other
School Name and Location					
Years Completed	4 5 6 7 8	9 10 11 12	1 2	1 2 3 4	1 2 3 4
Diploma Degree		Yes No	Yes No	Yes No	
Major Course(s) of Study					
Summarize special skills ar	nd training not listed	above:			
Describe honors received:					
Professional Licenses and Certificates	Туре:	State Issued:	Date Issued:	Expires On:	Number:
List professional, trade, bus reveal sex, race, religion, n					rships which may
REFERENCES					
Give names, addresses, an 1	d telephone numbers	s of three busines	ss references	who are not rela	ated to you.
2					

2. 2. 2. PRIOR WORK FXPERIEN		BC	IN IF SUBMITTING A RESUME*)
1. Employer	Dates I	Employed	Work Performed
Address	From	То	
Telephone Number(s)	Annual Salar	y or Hourly Rate	
Job Title	Start	Final	
Supervisor's Name	· ·	φ.	

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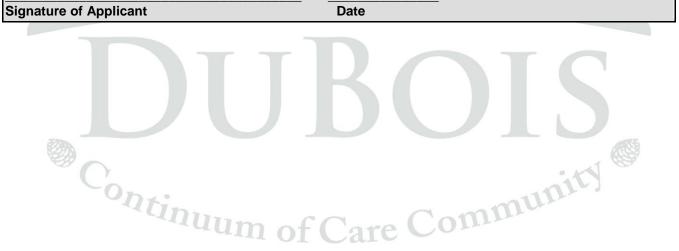
Reason for Leaving

2. Employer	Dates	Work Performed		
Address	From	То		
Telephone Number(s)	Annual Sala	Annual Salary or Hourly Rate		
Job Title	Start	Final		
Supervisor's Name	\$	\$		
Reason for Leaving	-	1		
3. Employer	Dates	s Employed	Work Performed	
Address	From	То		
Telephone Number(s)	Annual Sala	Annual Salary or Hourly Rate		
Job Title	Start	Final		
Supervisor's Name	\$	\$	1	
Reason for Leaving				
4. Employer	Dates	Dates Employed		
Address	From	То		
Telephone Number(s)	Annual Salary or Hourly Rate		TC	
Job Title	Start	Final		
Supervisor's Name	\$	\$		
Reason for Leaving	•	•	. 17	
If you need additional space SPECIAL SKILLS & QUAL	e, please continue on the b	eack of this employment app	plication	

SDECIAL	CVIII	C 0 011	AL IEIC	ATIONIC

Summarize special job-related skills and qualifications acquired from employment or other experience.		
Have you ever had any job-related training?	Yes	No
If yes, please describe and give date:		
Are you able to perform the essential functions of the job with or without reasonable accommodation?	Yes	No

State any additional information you feel may be helpful to us in considering your application.
PLEASE READ BEFORE SIGNING
I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
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 documentation 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, incomplete or misleading information given in my application or interview(s) may result in denial of employment, or if employed, immediate discharge from employment. I understand, also, that I am required to abide by all rules and regulations of the Employer.



Date

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