

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE	PLEASE COMPLETE PAGES 1-4.		DATE		
Name					
	Last	First	Middle		Maiden
Present Home Address	<u> </u>				
	Number	Street	City State	Zip	
How long have you live	ed there?	Sc	cial Security No.		
Cel Phone (<u>)</u>	Home Pho	ne <u>(</u>)			
f under 18, please list a	age				
			Mon Tue	ailable to work Thur Fri Sat Sun	
How many hours can y	ou work weekly?			nights?	
	ou work weekly?		_ Can you work	-	
Employment desired	FULL-TIME ONLY	PART-TIME	_ Can you work ONLY Fe hourly wage you	- -ULL- OR PART u had at you last	T-TIME
Employment desired When available for wor	FULL-TIME ONLY	PART-TIME	_ Can you work ONLY F e hourly wage you	- -ULL- OR PART u had at you last	T-TIME
Employment desired When available for wor	FULL-TIME ONLY k? I 1	PART-TIME n Order, Please list the l.) 2 LOCATION (Complete mailing	_ Can you work ONLY F e hourly wage you	FULL- OR PART u had at you last 3.)	T-TIME t 3 jobs: MAJOR 8
Employment desired When available for wor TYPE OF SCHOOL High School	FULL-TIME ONLY k? I 1	PART-TIME n Order, Please list the l.) 2 LOCATION (Complete mailing	_ Can you work ONLY F e hourly wage you	FULL- OR PART u had at you last 3.)	T-TIME t 3 jobs: MAJOR 8
Employment desired When available for wor TYPE OF SCHOOL High School College	FULL-TIME ONLY k? I 1	PART-TIME n Order, Please list the l.) 2 LOCATION (Complete mailing	_ Can you work ONLY F e hourly wage you	FULL- OR PART u had at you last 3.)	T-TIME t 3 jobs: MAJOR 8
Employment desired When available for wor	FULL-TIME ONLY k? I 1	PART-TIME n Order, Please list the l.) 2 LOCATION (Complete mailing	_ Can you work ONLY F e hourly wage you	FULL- OR PART u had at you last 3.)	T-TIME t 3 jobs: MAJOR 8

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APPLICATION FOR EMPLOYMENT DO YOU HAVE A DRIVER'S LICENSE? __ Yes __ No What is your means of transportation to work? _____ Driver's license _____ State of issue ____ Operator __ Commercial (CDL) __ Chauffeur number ___ Expiration date Have you had any accidents during the past three years? How many? _____ Have you had any moving violations during the past three years? How Many? _____ Please list two references other than relatives or previous employers. Name __ Name Position _____ Position Company _____ Company _____ Address Address Telephone () Telephone () **SCREEN PRINTING EXPERIENCE** Do you have experience screen printing in a business/shop environment? _____Yes _____No How many years? _____ Was the Press ___Automatic or ___Manual? Do you know how to use the Pantone ink mixing system? ____Yes ____No Have you ever exposed a screen? ____Yes ____No Do you know how to reclaim screens? ____Yes ____No Do you know how to apply emulsion on to screens? Yes No Do you know how to setup an automatic press? _____Yes _____No

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DI IOATION FOR EMPLOYMENT	

APPLICATION FOR EMPLOYMENT					
MILITARY					
HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No					
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No					
Specialty Date Er					
Date Li	itered	Discharge Date	·		
Work Please list your work experience for the past five years beginning with your most recent job held. Experience If you were self-employed, give firm name. Attach additional sheets if necessary.					
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip Code Phone number		From	Start		
		То	Final		
	Your last job title				
Reason for leaving (be specific)					
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip Code Phone number		From	Start		
		То	Final		
	Your Last Job Title				
Reason for leaving (be specific)					
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.					

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Work Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.					
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip Code Phone number		From	Start		
Thore number		То	Final		
	Your last job title	Your last job title			
Reason for leaving (be specific)					
List the jobs you held, duties performed, skills used or learned company.	ed, advancements or pro	omotions while you wo	rked at this		
		1	ı		
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip Code Phone number		From	Start		
There is named.		То	Final		
	Your last job title				
Reason for leaving (be specific)					
List the jobs you held, duties performed, skills used or learned company.	ed, advancements or pro	omotions while you wo	rked at this		
May we contact your present employer? Yes No)				
Did you complete this application yourself Yes No					
If not, who did?					