

List courses you have completed which will aid the Company in evaluating your qualifications for the position you are applying for. Use additional sheets if necessary. (Example: If applying for a clerical position, note training such as word processing, typing, bookkeeping, computer/CRT.) Please include grade or other indicator of achievement, such as words per minute typed.

COURSE	DATES ENROLLED IN COURSE	SCHOOL OR OTHER SPONSOR OF COURSE	DESCRIBE MAJOR CONTENT OF COURSE	GRADE
	FROM TO			
	FROM TO			
	FROM TO			
	FROM TO			

GENERAL INFORMATION

[Note: When completing this application, your responses to inquiries about organizations and activities should not be revealing as to race, color, creed, national origin, age, marital or Vietnam veteran status, sex, sexual orientation, disability or ancestry.]

List relevant scholastic honors, offices held, and relevant activities in high school or college:

Use the space below to describe your activities, skills and aptitudes that you believe would reasonably bear on your qualification for the position you are applying for at the Company. (You may wish to include civic and community activities, professional societies relating to the specific position for which you are applying in which you participate, special training or skills such as typing, accounting/bookkeeping, shorthand, computer/CRT machine, word processing or other skills.) If you need more space, please continue on a separate sheet.

Have you been employed here previously? Yes No Have you ever applied here before? Yes No

Have you ever been convicted of a criminal offense? Yes No

(Note: A conviction does not automatically disqualify an applicant from employment. What you were convicted of and how long ago are important.) If the answer is "yes," then for each such conviction, indicate (a) the date(s) of conviction, (b) the nature of the offense, (c) the penalty imposed, (d) whether the offense involved a financial institution, and (e) the circumstances involved. Exclude any arrest(s), acquittal(s), conviction(s) reversed on appeal, conviction(s) that have been completely expunged, and/or any adjudgment(s) against you by a court as a "youthful offender" or "juvenile delinquent."

Do you have any charges pending against you? _____

(Note: A pending charge does not automatically disqualify an applicant from employment. The type of charge(s) and the surrounding circumstances are important.) If the answer is yes, indicate the pending charge(s) and surrounding circumstances:

Have you entered into a pretrial diversion or similar program relating to any criminal offense ("program entry")? Yes No

(Note: For purposes of this inquiry, "program entry" is defined as suspension or eventual dismissal of charges or criminal prosecution upon agreement to enter into treatment, rehabilitation, restitution, or other noncriminal or nonpunitive alternatives. Entry into such a program does not automatically disqualify an applicant from employment. The nature of the program and how long ago are important.)

For each such "program entry," indicate (a) the date(s) you entered into the program, (b) the nature of the offense, (c) whether you completed the required treatment, rehabilitation, restitution, or other alternatives, (d) the ultimate disposition of the charges, and (e) the circumstances involved. Exclude any program entries prior to November 29, 1990.

Has a surety bond ever been refused to you? _____ For a position for which a surety bond is a requirement: If yes, indicate when and the surrounding circumstances: _____

List below all present and past employment, beginning with your most recent position.

DATES	NAME AND ADDRESS OF EMPLOYER	DESCRIBE THE WORK YOU DID	SALARY	EXACT REASON FOR LEAVING
From:			From:	
To:			To:	
	Telephone:	Supervisor:		May we Contact them? <input type="checkbox"/> Y <input type="checkbox"/> N
From:			From:	
To:			To:	
	Telephone:	Supervisor:		May we Contact them? <input type="checkbox"/> Y <input type="checkbox"/> N
From:			From:	
To:			To:	
	Telephone:	Supervisor:		May we Contact them? <input type="checkbox"/> Y <input type="checkbox"/> N
From:			From:	
To:			To:	
	Telephone:	Supervisor:		May we Contact them? <input type="checkbox"/> Y <input type="checkbox"/> N

If you need more space to list all of your present employment, please continue on a separate sheet.

PERSONAL REFERENCES
(Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number	No. of years you have know reference

AGREEMENT

PLEASE READ BEFORE SIGNING. If you have any questions regarding this Agreement, please ask them of a personnel officer before signing.

In order that the Company may arrive at an employment decision, I understand that the Company may do any or all of the following, and I hereby consent to the same:

1. Investigate all statements contained in this application for employment.
2. Request that I be fingerprinted.

I understand that if I receive an offer of employment I may be required to undergo a medical examination conducted by a doctor of the Company's choice, and to submit to drug and alcohol screening tests. I also understand that my employment may be conditioned on the results of that examination and these tests.

If employed, as a condition of continued employment, I agree to submit to drug screening tests from time to time, if requested to do so by the Company. I understand that failure to cooperate with the testing may be grounds for dismissal.

In the event that I am employed by the Company:

1. I will comply with all rules and policies of the Company, including a request for a current personal photograph meeting the Company's specifications; and

2. I understand that my employment can be terminated at any time, with or without cause, either at my option or that of the Company; I understand that no personnel recruiter, interviewer or other representative of the Company other than the President has any authority to enter into any agreement for employment for any specified period of time; I also understand that any employment manuals or handbooks that may be distributed to me during the course of my employment shall not be construed as an employment contract.

I certify that the answers and information given in this employment application are true and correct to the best of my knowledge. If I am hired, I understand that false or misleading information given in my application or interviews is grounds for discharge from employment.

Date **Signature**

Date employment offered _____ Date accepted _____ Date refused _____

Date employed _____ Date of Birth _____ Exempt Non-Exempt

Department _____ Social Security Number No. _____

Job Title _____ Work Schedule (Hrs., Days, etc.) _____

Job No. _____

Maiden Name _____

In case of accident or other emergency who is the first person we should contact?

Name _____ Relationship _____ Telephone _____
(Home) (Business)

Address _____
(Number) (Street) (City) (State)

Address _____
(Place of Work) (City) (State)



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INVITATION TO IDENTIFY FOR AFFIRMATIVE ACTION RELATED PURPOSES

This company prepares affirmative action plans that cover females, minorities, and certain other individuals. This survey is meant to help the company fulfill various objectives in these affirmative action plans.

PLEASE NOTE: You are not required to complete any part of this form. The decision not to complete this form will not affect any opportunity for employment or any benefits with the company. Any information you provide in this survey will be kept confidential and will not be used in any way that may adversely affect your employment with this company.

Name: _____ Date: _____

Position you are applying for: _____

How were you referred to the company? _____

AFFIRMATIVE ACTION RELATED DATA (Please check appropriate boxes)

Sex: Male

Female

Ethnicity: Hispanic (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

Not Hispanic

IF you checked "Not Hispanic" above, please check **one or more** of the boxes below.

Race: White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

Asian/Indian Subcontinent (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)

Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)

Black/African American (A person having origins in any of the Black racial groups of Africa.)

Native American/Alaskan Native (A person having origins in any of the original peoples of North and South America [including Central America], and who maintains tribal affiliation or community attachment.)