

Application for Employment

(Please Print)

Date of Application _____

Position(s) Applied For _____

Referral Source: _____ Advertisement _____ Friend _____ Relative
_____ Employment Agency _____ Other _____

Name _____
LAST FIRST MIDDLE

Address _____
NUMBER STREET CITY STATE ZIP CODE

Telephone _____

Are you related to a Forked Deer Electric Director or Employee ? _____ Yes _____ No

If employed and you are under 18,
can you furnish a work permit? _____ Yes _____ No

Have you filed an application here before? _____ Yes _____ No If yes, give date _____

Have you ever been employed here before? _____ Yes _____ No If yes, give date _____

Are you lawfully authorized to work in the U.S.? _____ Yes _____ No
(Proof of citizenship or immigration status may be required upon employment)

On what date would you be available for work? _____

Are you available to work _____ Full time _____ Part time _____ Temporary

Are you on a lay-off and subject to recall? _____ Yes _____ No

Can you travel if a job requires it? _____ Yes _____ No

Have you been convicted of a felony within the last 7 years? _____ No _____ Yes
(Conviction will not necessarily disqualify applicant from employment)

If Yes, please explain _____

Have you been given a job opening announcement that states the essential requirements of
the position? _____ Yes _____ No

Are you capable of performing with or without reasonable accommodation, the essential
functions of the job for which you applied? _____ Yes _____ No

Indicate languages you speak, read, and/or write

Language	Speak	Read	Write

List professional, trade, business or civic activities and offices held.

(You may exclude those which indicate race, color, religion, sex or national origin):

Give name, address and telephone number of three references who are not related to you and are not previous employers:

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which include race, color, religion, sex or national origin.

1	Employer	Telephone ()	Date Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
			Starting	Final	
	Supervisor				
Reason for Leaving					
2	Employer	Telephone ()	Date Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
			Starting	Final	
	Supervisor				
Reason for Leaving					
3	Employer	Telephone ()	Date Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
			Starting	Final	
	Supervisor				
Reason for Leaving					
4	Employer	Telephone ()	Date Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
			Starting	Final	
	Supervisor				
Reason for Leaving					

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience

Education

	Elementary	High	College/University	Graduate/Professional
School Name				
Years Completed: (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 5	1 2 3 4
Diploma/Degree				
Describe Course of Study:				
Describe Specialized Training, Apprenticeship Skills, and Extra Curricular Activities				

Honors Received:

State any additional information you feel may be helpful to us in considering your application.

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. I understand that this application is not and is not intended to be a contract of employment.

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 Company.

Signature of Applicant

Date

For Personnel Department Use Only

Arrange Interview	___ Yes	___ No		
Remarks	_____			
			Interviewer	Date
Employed	___ Yes	___ No	Date of Employment	_____
Job Title	_____	Hourly Rate/Salary	_____	Department
	By	_____	_____	_____
		Name and Title		Date

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