



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION Complete *all* applicable information

Name (Full - Last, First, MI)		Social Security Number	
Position(s) applied for:		Are you willing to work: ___ Full Time ___ Part Time ___ Temporary ___ Weekends ___ Evenings ___ Nights	
Street Address:		City	State
		Zip	
Home Phone	Business Phone	Have you previously been employed by our company? ___ Yes ___ No When?	
Are you legally authorized to work in the United States? ___ Yes ___ No		When could you start employment?	
Have you ever been convicted of a crime or violation other than a minor traffic infraction? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes explain: _____ _____ _____		How were you referred to USA Screen Printing & Embroidery? (Check one box and list source) <input type="checkbox"/> Newspaper <input type="checkbox"/> Temporary Agency <input type="checkbox"/> Internet Advertisement <input type="checkbox"/> Employee Referral <input type="checkbox"/> Walk In <input type="checkbox"/> Other List Source: _____	
A conviction record will not necessarily be a bar to employment. Factors such as job relations, age and time of the offense, seriousness and nature of violation and rehabilitation will be taken into account.		Are you at least 18 years of age? <input type="checkbox"/> YES <input type="checkbox"/> NO	

EMPLOYMENT HISTORY

(List below last three employers, starting with the most recent one first)

Present or Last Position	Name of Company		From Mo/Yr	To Mo/Yr
Street Address:		City	State	Zip
Duties:		Reason for Leaving:		
Starting Annual Salary	Final Annual Salary	Bonus	Commission	May we contact your supervisor?
Name of Supervisor		Title and Department of Supervisor		Phone Number of Supervisor
Next Previous Position	Name of Company		From Mo/Yr	To Mo/Yr
Street Address		City	State	Zip
Duties:		Reason for Leaving:		
Starting Annual Salary	Final Annual Salary	Bonus	Commission	
Name of Supervisor		Title and Department of Supervisor		Phone Number of Supervisor

Next Previous Position	Name of Company	From Mo/Yr	To Mo/Yr
Street Address		City	State Zip
Duties:		Reason for Leaving:	
Starting Annual Salary	Final Annual Salary	Bonus	Commission
Name of Supervisor	Title and Department of Supervisor	Phone Number of Supervisor	

EDUCATION INFORMATION

High School or GED	Address	City	State	Degree	Subjects Studied	
College	Address	City	State	Degree	Major	GPA
College	Address	City	State	Degree	Major	GPA
Graduate School	Address	City	State	Degree	Major	GPA

GENERAL INFO

List all certifications and Licenses:
What business equipment can you operate? (For example, computers, copiers, etc.)
In what computer software programs are you proficient ? [Name the package(s).]
Additional Space (if needed):

PROFESSIONAL REFERENCES

I give my permission for the employer on this application to contact the below listed references. Please list supervisors, co-workers, or any person that can verify your work history. (DO NOT list relatives or friends)

Name	Relationship	Phone Number	Address

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY

- In consideration of my employment, I agree to conform to the policies and procedures of the company. I understand that in accepting this application, the company is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without cause, and with or without notice at any time.
- I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any falsified statements on this application or omission of fact on either this application or during the pre-employment process will result in my application being rejected, or, if I am hired, in my employment being terminated.
- I give my permission for the employer on this application to contact the listed references.
- I also understand that any offer of employment is conditioned on the completion of pre-employment tests, background check and documentation. I will, upon request, sign all necessary consent forms.
- I understand that no employee or representative of USA Screen Printing & Embroidery Co, Inc., other than the president, has any authority to enter into any agreement, whether orally or in writing, guaranteeing my employment for any specified period of time, nor make an agreement contrary to the foregoing.

SIGNATURE:

DATE:

PRINTED NAME:

