FOR OFFICE USE:			
Position(s):			_
Screening Interview://	Second Interview://	ID & work authorization verified:	_//

	nard's Press		
Employmen	_	ation	
An Equal Opportunity Employer, At-W	'ill Employer. We d	rug-test all app	<u>licants.</u>
Job Objective Position(s) applying for: 1st Choice: 2nd Choice: Skills List the graphic arts equipment and/or graphic arts	skills in which you 1	feel experienced.	FT PT
Equipment and/or skills	Years	Chec Very Experienced	k One: Moderately Experienced
PLEASE READ CAREFULLY: We appreciate your interest open in a department for which we feel you may be to an interview, so please make sure you fill it out to place and all applicants are required to take a drug Date of Application	qualified, we will co completely and clear	ontact you. This i ly. We strive for a	s your best path
Last name	First Name		Middle
Date available to start:	Will you travel if job	requires it?	Yes No
Referral Source: Advertisement Employ Other:		tive 🗌 Walk-ii	1

Hours available to work Monday through Sunday: (List below)

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
T0							
FROM							
Your Persona Present Addre							
No. & Street () Business	 s Phone	(City) Home Phone	-	State	Zip Cell Phone	 ·
Personal Add	ress (if differ	ent from pres	ent address)				
No. & Street			City		State	Zip	
What is the b	est time to co	ontact vou?	☐ Morning	☐ Afterno	oon 🗌 Ever	ning	
May we conta						_	tact at work:
l. Do you have f yes, state na	-		orking for the F	Business Phone Poor Richard'			Yes No
Name			Relatio	nship	Positio	n Held	
2. Have you ev	er applied to	or worked for	Poor Richard'	's Press befor	e?		Yes No
	-		ans of transpor	tation to and	from work?		Yes No
1. Are you at le	-			and the same and	. f f	a I indicate A a	Yes No
		•	our U.S. citize	ensnip or prod	of of your leg	ai right to	Yes No
ive and work in	,		unctions of the	o iob for whic	sh you aro an	nlying	
either with or v	•			e job for wille	ni you are ap	piying,	Yes No
			be performed.				
			accommodation mo				ts/employees to
7. Have you ev	er been conv	icted of a crir	ninal offense (felony or seri	ous misdeme	eanor)?	Yes No
Convictions for m	narijuana-related	offenses that ar	e more than two	years old need n	ot be listed.)		
f yes, state na	ture of the cr	ime(s), when	and where co	nvicted, and	disposition o	f the case.	
			the grounds of con				
3. Have you ev	ver been term	inated or aske	ed to resign fro	om a job?			☐ Yes ☐ No
f yes, explain:			3	-			
		t requires driv	ving for the co	mpany, can y	ou provide a	valid	Yes No
drivers license	, proof of insu	urance and a	current DMV r	ecord?			

Education, Training and Experience

A: List the last three schools attended, starting with the most recent one. B: List city & state of school. C: List number of years completed. D: Indicate any degree or diploma earned. E: Pertinent coursework. F: GPA

A: School Name	B: City & Si	ate C: Ye		D: Degree o diploma	r E: F	Pertinent cou	tinent coursework F: GPA	
List any foreign language	es and check the box(es) that best d	lescribe	es your skill le	vel.			
Language	Fluent: read, writ	e, & speak		Read	\	Write	Spe	ak
Employment History List below all present a sufficient). Account for complete this section a Use reverse side of this	r all periods of unen even if attaching a r	nployment, N esume.	//////////////////////////////////////	r service, and r period.			•	:
Name of Employer			Telep	hone No.				
Type of Business		Your S	Supervis	or's Name			_	
Address & Street		City			State	Zip		
Dates of Employmen	t:	H	ourly/	Salary Pay:	Starting	Ending		
Your Position and Duties								
Reason for Leaving								
May we contact this If "No", Explain:	employer for a ref	erence?	Yes	No				
Name of Employer		() Telep	hone No.		-		
Type of Business		Your	Supervi	sor's Name				
Address & Street		City			State	Zip		
Dates of Employmer	nt:	Н	ourly/	Salary Pay:	 Starting	Ending	<u> </u>	
Your Position and Duties						-		
Reason for Leaving						_		

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		Telephone No.					
Name of Employer Type of Business		петерноне тчо.					
		Your Supervisor's Name					
Address & Street		City	State Z	Zip			
Dates of Employment: From	To	Hourly/Salary Pay:	Starting	Ending			
our Position and Duties							
eason for Leaving							
May we contact this emplo If "No", Explain:	yer for a referen	ce? Yes No					
References List below three persons not years.	related to you who) have knowledge of your wo	ork performan	ce within the last t			
First Name	Last Name		Teleph	one No.			
Address & Street		City	State 2				
Occupation		No. of Years Acquainted					
How are you acquainted? (Co-worke	er? Supervisor?, etc.)						
First Name	Last Name		() <u>Teleph</u>	one No.			
		City	State 7				
Address & Street		,	otato <u>z</u>				
		No. of Years Acquainted					
Occupation	er? Supervisor?, etc.)		State 2				
Occupation	er? Supervisor?, etc.)		()				
Occupation How are you acquainted? (Co-worke	er? Supervisor?, etc.) Last Name		()	 one No			
Occupation How are you acquainted? (Co-worke			()	 one No. 			
Occupation How are you acquainted? (Co-worke First Name Address & Street		No. of Years Acquainted	()				
Address & Street Occupation How are you acquainted? (Co-worket First Name Address & Street Occupation How are you acquainted? (Co-worket)	Last Name	No. of Years Acquainted City	()				

I hereby certify that I have not knowingly withheld any information that might Initials adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. I hereby authorize Poor Richard's Press to thoroughly investigate my references, work Initials record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Poor Richard's Press, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. I understand that nothing contained in the application or conveyed during any interview Initials which may be granted or during my employment, if hired, is intended to create an employment contract between me and Poor Richard's Press. In addition, I understand and agree that if I am employed my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or Poor Richard's Press and that no promises or representations contrary to the foregoing are binding on Poor Richard's Press unless made in writing and signed by me and Poor Richard's Press's designated representative. Should a search of public records (including records documenting an arrest, indictment, Initials conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by Poor Richard's Press, I am entitled to copies of any such public records obtained by Poor Richard's Press unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below. I waive receipt of a copy of any public record described in the paragraph above Date Applicant's Signature

Please Read Carefully, Initial Each Paragraph and Sign Below

Note: This application will remain "open" for consideration for three months, after which, a new one must be submitted. Thank you.