Application for Employment

All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or Veteran status, medical condition or handicap, or any other status protected by law. We are an Equal Opportunity Employer.

PERSONA	L INFORMATI	ON: (please p	orint). DATE:				
Name(Last)		First)	Social Security Number				
• •	•	. 1131/	(tandic 1111	9			•
AddressNo.	Street			City	State		Zip
Telephone N	0		Potorrod b	,	Emp. Agency	/ Friend or F	elativo
			•				cidiive
Are you over	18 years of age	?Yes	_No ~If NO,	a work permit v	vill be required		
Are you legal (If hired, verificat	ly eligible for en ion will be required	nployment in ti by law)	ne United States	?		í	
Position(s) ap	plied for			-	Full time	Part Time	•
			select the days		•		
		1 10000	sciect the days	s anu nouis a	valiable.		
Times	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
AM.					<u> </u>		
PM	<u> </u>		<u> </u>		<u> </u>		
Date you are	available to star	t work:		Salary or Wag	ges desired: \$	hr	wk
Have you ever worked for us before?				If YES, when?Position_			-
- Please fell us	ahout any snec	eial mualificatio	ne or ekille vou r	nav have that v	vill assist your su	uueee.	•
- I Case ten us	about any spec	iai quailloallo		nay nave mat v	will assist your su		
		•				•	
EDUCATION: name/location of school			Course of study			s Completed	Graduate?
High School College							
Other							
			***************************************			_	
Are you emplo	yed at the presen	t time?	YesNo	If hired, are you	ı willing to work o	ver time?	YesNo
Have you ever	been bonded?	***************************************	If YES, list name	e(s) of employer((s):		***************************************
Have you ever		of a crime (excl	uding misdemean	ors and traffic of	fenses) Yes		•
• • • •							•

PRIOR EMPLOYMENT: (Start with the most recent Employer)

EMPLOYER:				FROM:	TO:		
ADDRESS:				POSITION:			
DUTIES:				SUPERVIS	ORS NAME:		
DOTES.				PHONE:			
DELCOLUE TEAT	DIO.			STARTING	SALARY/WAGES:		
REASON FOR LEAV	ınd:		ENDING SALARY/ WAGES:				
•							
EMPLOYER:	***************************************	FROM:					
ADDRESS:				POSITION:			
DUTIES:		SUPERVIS	ORS NAME:				
				PHONE:	•		
REASON FOR LEAV	ING:	STARTING	SALARY/ WAGES:				
IUNION LOICIMIT		ENDING S.	ENDING SALARY/ WAGES:				
				FROM:	TO:		
EMPLOYER:	· · · · · · · · · · · · · · · · · · ·			POSITION:			
ADDRESS:		•	•	1	SUPERVISORS NAME:		
DUTIES:		•		SUPERVIS	OKO HAMD.		
•				PHONE:	CAY ADVIWACES.		
REASON FOR LEAV	ING:			1	STARTING SALARY/ WAGES:		
				ENDING S	ALARY/ WAGES:		
	· · · · · · · · · · · · · · · · · · ·						
military servic	Œ:						
Branch of Service:	From	To	Rank and Duti	es	Date Discharged		
PERSONAL REFER	ENCES:			•			
I DROOMAL ROLL							
NAME		ADDRESS		YEARS KNOWN	TELEPHONE		
IAWIATE		ADDALLO					
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