



SKLADANY PRINTING CENTER



APPLICATION FOR EMPLOYMENT

NAME _____ SOCIAL SECURITY NUMBER _____
 ADDRESS _____ HOW LONG AT THIS ADDRESS _____
 CITY, STATE, ZIP _____ HOME PHONE _____
 POSITION APPLYING FOR _____ EARNING EXPECTED _____

SKILLS/QUALIFICATIONS

FOR PRINTING RELATED POSITIONS, PLEASE INDICATE THE EQUIPMENT WITH WHICH YOU HAVE EXPERIENCE

- ITEK 430 CAMERA AD DICK 360 OFFSET PRESS FOLDER
 ITEK 3200 OFFSET PRESS POWER PAPER CUTTER COLLATOR
 OTHER OFFSET PRESSES OR CAMERAS (SPECIFY) DRILL

OTHER PRINTING RELATED EQUIPMENT (SPECIFY)

INDICATE WHICH OF THE FOLLOWING YOU HAVE EXPERIENCE PRINTING 8.5 X 11 8.5 X 14
 BUSINESS CARDS POSTCARDS ENVELOPES NCR COLOR INKS

WHY HAVE YOU CHOSEN PRINTING FOR YOUR PROFFESION? _____

PERSONAL REFERENCES _____

EDUCATION

| NAME/ADDRESS OF SCHOOL | COURSES | DEGREE | DATE OF GRADUATION |
|------------------------|---------|--------|--------------------|
| HIGH SCHOOL _____ | | | |
| COLLEGE _____ | | | |
| GRADUATE _____ | | | |
| TRADE _____ | | | |
| OTHER _____ | | | |

WORK HISTORY

| | | |
|--|-----------------------|-------------------------|
| EMPLOYER <hr/> | FROM / TO <hr/> | WORK PERFORMED <hr/> |
| ADDRESS <hr/> | PHONE NUMBER <hr/> | <hr/> |
| JOB TITLE <hr/> | PAY RATE <hr/> | <hr/> |
| REASON FOR LEAVING <hr/> | | |
| MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO | | |

| | | |
|--|-----------------------|-------------------------|
| EMPLOYER <hr/> | FROM / TO <hr/> | WORK PERFORMED <hr/> |
| ADDRESS <hr/> | PHONE NUMBER <hr/> | <hr/> |
| JOB TITLE <hr/> | PAY RATE <hr/> | <hr/> |
| REASON FOR LEAVING <hr/> | | |
| MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO | | |

| | | |
|--|-----------------------|-------------------------|
| EMPLOYER <hr/> | FROM / TO <hr/> | WORK PERFORMED <hr/> |
| ADDRESS <hr/> | PHONE NUMBER <hr/> | <hr/> |
| JOB TITLE <hr/> | PAY RATE <hr/> | <hr/> |
| REASON FOR LEAVING <hr/> | | |
| MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO | | |

PERSONAL: MALE FEMALE U.S. CITIZEN? YES NO

| | |
|---|------------|
| <p>I certify that answers given herein are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in withdrawal of offer of employment, or if subsequent to employment, may result in dismissal.</p> | |
| SIGNATURE _____ | DATE _____ |