

# Application For Employment



Please fill out this form, sign it (page 4)  
and fax to: 440-717-4200

8000 Katherine Blvd; Brecksville, Ohio 44141

**We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital, veteran status, sexual orientation, or any other legally protected status.**

**PLEASE PRINT:**

<b>Position(s) Applied For:</b>			<b>Date Of Application:</b>	
<b>How Did You Learn About Us?</b>				
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In		
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other:		
Last Name		First Name		Middle Name
Address		City	State	Zip Code
Telephone Number(s)			Social Security Number	

If you are under 18 years of age, can you provide required  
Proof of your eligibility to work in the United States of America  Yes  No

Have you ever filed an application with us before?  
(If yes, give date)  Yes  No

Have you ever been employed with us before?  
(If yes, give date)  Yes  No

Are you currently employed  Yes  No

May we contact your present employer?  Yes  No

Are you prevented from lawfully becoming employed in this country because of *Visa* or  
*Immigration Status*?  Yes  No

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  Full Time  Part Time  Shift Work  Temporary

Are you currently on "lay-off" status 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 seven years?  
*Conviction will not necessarily disqualify an applicant from employment.*  Yes  No

If yes, please explain \_\_\_\_\_

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# Education

Clarification	Name and Address Of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

**Indicate any foreign languages you can speak, read and/or write**

Clarification:	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

**Describe any specialized training, apprenticeship, skills, and extra-curricular activities.**


**Describe any job-related training received in the United States Military.**


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

You may exclude memberships that reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status:


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# Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number		Hourly Rate		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				

2.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number		Hourly Rate		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				

3.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number		Hourly Rate		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				

4.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number		Hourly Rate		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				

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# 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.

This application for employment shall be considered active for a period of time not to exceed 45-days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that unless otherwise defined by applicable law any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

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 employer.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

## FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview  Yes  No

Remarks: \_\_\_\_\_  
\_\_\_\_\_

Interviewers Signature \_\_\_\_\_

Date \_\_\_\_\_

Employed:  Yes  No Employment Dates: \_\_\_\_\_

Department: \_\_\_\_\_ Job Title: \_\_\_\_\_

Gross Salary: \_\_\_\_\_ Hourly Rate: \_\_\_\_\_ Other: \_\_\_\_\_

Interviewers Signature \_\_\_\_\_

Date \_\_\_\_\_

Interviewers Title \_\_\_\_\_

Interviewers Department \_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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# Additional Information

## Other Qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience.


## Specialized Skills:

Check Skills or Equipment Operated

Production/Mobile Machinery List	Others List	General Office Machine List	
		<input type="checkbox"/> CRT	<input type="checkbox"/> Fax
		<input type="checkbox"/> PC	<input type="checkbox"/> Copy
		<input type="checkbox"/> Calculator	<input type="checkbox"/> PBX System
		<input type="checkbox"/> Typewriter	<input type="checkbox"/> Computer Applications

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


### Note To Applicants:

Do *not* answer this question unless you have been informed about the requirements of the job for which you are applying.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job occupation is attached.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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### References:

1. \_\_\_\_\_  

Name
Area Code/Telephone Number

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Address
  
2. \_\_\_\_\_  

Name
Area Code/Telephone Number

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Address
  
3. \_\_\_\_\_  

Name
Area Code/Telephone Number

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Address

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# Human Resources Department

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**Human Resources Department will complete this page.**

Position(s) Applied For Is Open:     Yes     No

Position(s) Considered For: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTES:**

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