



902 West Main Street | Teutopolis, IL 62467 | p. 217.857.3153

FOR OFFICE USE ONLY: Dept _____
Hire Date ____/____/____ Wage _____ Shift _____

Application for Employment

Last Name		First Name		Middle	Date of Application	
Street/P.O. Box		Apt. #		City	State	Zip
Day Phone No.		Email address			Social Security No.	
Emergency Contact's Name			Home Phone No.		Work Phone No.	
Street/P.O. Box		Apt. #		City	State	Zip

PERSONAL

- Are you at least 18 years old? Yes No
If no, please list birth date: _____
- Have you ever been employed by Three-Z Printing Co.? Yes No
If yes, from: _____ to: _____
Why did you leave? _____
- Do you have the legal right to remain and work in the United States? Yes No
(Authorization for employment and Proof of Identity required upon employment)
- What prompted you to apply for work here?
 Company Image Friend Employee Referral Newspaper
 Other _____
- Are you on lay-off and subject to recall? Yes No
- Are you able to meet the attendance requirements of the position? Yes No
- Will you work overtime if required? Yes No
- Driver's License Number (if job-related) _____ State _____

AVAILABILITY TO WORK

- Position(s) applied for: _____ Date Available to Work: _____
- Type of Employment Desired: (please check one) Full Time Part Time Seasonal Temporary
- Do you have any obligations which would affect your working schedule? Yes No
If so, please explain: _____
- How soon after accepting an offer would you be able to start working? _____
- Notes/Comments: _____

EXPERIENCE

	Job 1	Job 2	Job 3
Employer			
Address/Location (Include City, State, Zip)			
Dates Employed	From _____ to _____ Mo/Yr Mo/Yr	From _____ to _____ Mo/Yr Mo/Yr	From _____ to _____ Mo/Yr Mo/Yr
Position(s) Held			
Supervisor's Name			
Phone Number			
Starting Salary/Wages	\$ _____	\$ _____	\$ _____
Final Salary/Wages	\$ _____	\$ _____	\$ _____
May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Responsibilities			
Reason for Leaving			

SKILLS AND QUALIFICATIONS

Summarize any special training skills, licenses, certificates and/or characteristics of yourself that may qualify you as being able to perform job-related functions for the position which you are applying.

EDUCATIONAL BACKGROUND

Name and Location	Years Completed	Did you graduate?	Course of Study	
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No		
College		<input type="checkbox"/> Yes <input type="checkbox"/> No	Major	Degree
Other				

REFERENCES

Name	Telephone	Years Known

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such person and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre-and/or post-employment drug screen as a condition of employment, if required.

Three-Z Printing Co. is an Equal Opportunity Employer. We do not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 90 days. At the conclusion of this time, if I have not heard from Three-Z Printing Co. and still desire to be considered for employment, it will be necessary for me to fill out a new application.

The Applicant is not obligated to disclose sealed or expunged records of conviction or arrest. I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____

*Equal access to programs, services and employment is available to all persons.
Those applicants requiring accommodation to the application and/or interview process
should contact a representative of the Human Resources Department.*

