

Position(s) applying for _____

Date _____

Personal Data

Full Name _____

Current Address _____

Daytime Telephone _____ Evening/Message Telephone _____

Social Security Number _____ Date available to begin work _____

General Information

Have you applied for employment with TechnaPrint before? Yes No
If yes, date of application? _____

Have you ever been employed by TechnaPrint? Yes No
If yes, date(s) employed & reason for leaving? _____

Are you a citizen of the United States or otherwise eligible for employment in the United States? Yes No
Proof of identity and eligibility to work in the United States will be required prior to beginning employment.

Are you 18 years of age? Yes No *If no, employment is subject to verification of minimum legal age.*

Education

Please provide the following information about each high school, technical school, college and occupational training program you have attended, beginning with the most recent. Attach additional sheets of paper if necessary. List seminars, workshops and employer-sponsored training in the Additional Training section below. You may attach a resume instead of completing this section so long as the resume includes all of the information requested.

School Name	School Address	Major or Course of Study	# Years Attended	Degree/ Diploma

Employment History

Please provide the following information for **all** of your prior employers since you finished school, beginning with your most recent employer. Attach additional sheets of paper if necessary. You may attach a resume instead of completing this section so *long as the resume includes all of the information requested.*

Are you currently employed? Yes No If yes, may we contact your present employer? Yes No

Employer _____ Telephone Number _____
Address _____
Title/Duties _____
Supervisor's Name & Title _____
Reason for Leaving _____
Start Date _____ End Date _____ Starting Salary _____ Ending Salary _____

Employer _____ Telephone Number _____
Address _____
Title/Duties _____
Supervisor's Name & Title _____
Reason for Leaving _____
Start Date _____ End Date _____ Starting Salary _____ Ending Salary _____

Employer _____ Telephone Number _____
Address _____
Title/Duties _____
Supervisor's Name & Title _____
Reason for Leaving _____
Start Date _____ End Date _____ Starting Salary _____ Ending Salary _____

Employer _____ Telephone Number _____
Address _____
Title/Duties _____
Supervisor's Name & Title _____
Reason for Leaving _____
Start Date _____ End Date _____ Starting Salary _____ Ending Salary _____

List each time you have been unemployed for one month or longer since leaving school. Attached additional sheets if needed.

Time Period	Reason for Unemployment
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Additional Training

Please describe any additional training or professional development you have received, beginning with the most recent. Attach additional sheets of paper if necessary. You may attach a resume instead of completing this section so long as the resume includes all of the information requested.

Name & Description of Program	Program Sponsor & Address	Dates Attended	Certification Received
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Military Service

Branch of Service _____ Rank Attained _____ Dates of Service _____ Type of Discharge _____
Where served _____ Specialty _____

Additional Information

Do you have any licenses or certifications which are relevant to the position for which you are applying? Please describe.

Have you ever been convicted of a crime other than a minor traffic violation? Yes No

If yes, please describe the nature of the offense, the date of the offense and the jurisdiction where the conviction occurred on a separate sheet of paper. *A criminal conviction will not necessarily bar you from employment but may affect your suitability for some positions.*

Have you ever been listed by any other name on education, military, employment or other records? Yes No

Please list all your names and the dates when they applied on a separate sheet of paper.

Have you ever been discharged or requested to resign from a position? Yes No

If so, please explain on a separate sheet of paper.

Why do you desire to make a change in employment?

Will you work overtime whenever necessary? Yes No

If no, describe all limitations on your ability to work overtime when required on a separate sheet of paper.

If hired, do you have a reliable means of regularly traveling to and from work? Yes No

How?

If applicable to the position for which you are applying, what factory machines, office equipment or other devices can you operate?

Are you presently under a noncompetition, trade secret or nondisclosure agreement? Yes No

If yes, please explain on a separate sheet of paper.

Have you ever been disciplined by an employer for attendance problems? Yes No

If yes, please explain on a separate sheet of paper.

Are you presently using or have you used illegal drugs within the last 90 days? Yes No

If yes, please explain on a separate sheet of paper.

Notices & Acknowledgements

Please read carefully before signing.

- TechnaPrint is committed to the principle of equal employment opportunity in all terms and conditions of employment, including recruitment, hiring, training, promotion, compensation, benefits, transfers, termination, company-sponsored training, education, tuition assistance and social and recreational programs. We will not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, citizenship status, age, disability, status as a disabled veteran or veteran of the Vietnam era or any other reason prohibited by law.
- The information I have provided on this application is accurate to the best of my knowledge and is subject to verification by TechnaPrint. I understand that false statements or material omissions in my application materials may result in immediate dismissal.
- I understand that if employed, I am required to abide by all rules, regulations and policies of TechnaPrint.
- I understand that use of this application does not indicate there are any positions open and does not in any way obligate TechnaPrint to offer me employment.
- I understand that an offer of employment is subject to my providing proof of work eligibility, as required by United States law and my completion, satisfactory to TechnaPrint, of any and all pre-employment tests and procedures TechnaPrint decides to use.
- I authorize TechnaPrint to investigate my past and present work history as well as my character, education and police records to ascertain any and all information which may be pertinent to my employment qualifications.
- I authorize the schools, employers and references I listed in my application materials to release information about my school history, work history, character and qualification to all persons, firms, agencies or companies which may request this information in connection with my application for employment with TechnaPrint. In authorizing release of this information, I hereby release my schools, employers, references and all individuals associated with my schools, employers and references from any and all liability that may result from providing this information to TechnaPrint. This authorization will be valid for three (3) months from the date of my signature below.
- If employed, I understand my employment and compensation can be terminated with or without cause and with or without notice at any time, at the option of either TechnaPrint or myself. I understand that no representative of TechnaPrint, other than the President, has authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to provisions of this paragraph. Representations to the contrary must be in writing and must be signed by the President.
- I acknowledge that no other representations concerning the term or nature of my employment have been made to me or relied on by me.
- If employed, I agree that if TechnaPrint advances any paid leave before it has been accrued, advances or loans any money during the course of my employment or if I lose, damage or fail to return any property of TechnaPrint, I authorize {TechnaPrint to deduct from my wages sufficient funds to repay the paid leave, loans or advances or to replace its property.
- I certify I am not engaged in any outside activity or business that could be considered in conflict with the interest of TechnaPrint or those of its customers or clients and will not become engaged in such activity or business if employed.
- I acknowledge this application is valid for only 30 days from the date signed. I will submit a new application if I want to be considered for job openings more than 30 days from the date signed.
- I agree that any claims I may have against TechnaPrint arising out or relating to my application for employment or my subsequent employment with Account Abilities shall be settled by arbitration administered by the American Arbitration Association under its National Rules for the Resolution of Employment Disputes. Judgment upon the award rendered by the arbitrator(s) may be entered in any court having jurisdiction of the dispute.

Date

Signature of Applicant