APPLICATION FOR EMPLOYMENT

Personal Information

Name: _____
Last First Middle

Other names you have
worked under: _____

Present Address: _____
Street City State Zip Code

Permanent Address: _____
(if different) Street City State Zip Code

Home Phone Number: _____ Business Phone Number: _____

How did you learn of Penn Emblem Company? _____

If related to anyone in our employ
State name: _____ Referred by: _____

List any Penn Emblem Company employees you know: _____

Employment Desired

Position: _____ Date you Can Start: _____ Pay Desired: _____

Status
Desired: Full time _____ Part Time _____ Regular _____ Temporary _____

Are you employed now? _____

If so may we inquire of your present employer? _____

Have you previously been employed by the Company? Yes _____ No _____

If yes give dates and reasons for leaving _____

Have you ever applied to the Company before? Yes _____ No _____ If so, when _____

Education

School	Name & Location of School	Subjects Studied	Number of years Completed	Did you Graduate	Degree
Grammar/ Elementary					
High					
College					
Professional					
Business					
Correspondence					
Other					

Background

Are you legally entitled to work in the USA? _____ Yes _____ No

If hired, can you provide proof of entitlement to work in the USA? _____Yes _____ No
(All new hires are required to present documentation showing they are authorized to work prior to, or shortly after, commencing work)

Are you under 18 years of age? _____ Yes _____ No

Former Employers

List below last four former employers, starting with the most recent

Date/Month/Year ________________________ From _________________ To ___________________

Name and Address of Employer ____

____

Type of Work & Position(s) ____

Reason for Leaving _______________________________________

Date/Month/Year ________________________ From _________________ To ___________________

Name and Address of Employer ____

____

Type of Work & Position(s) ____

Reason for Leaving _______________________________________

Date/Month/Year ________________________ From _________________ To ___________________

Name and Address of Employer ____

____

Type of Work & Position(s) ____

Reason for Leaving _______________________________________

Job Qualifications

Please state any limitations on your availability to work (i.e. inability to work certain days or hours, etc.) ____

____

Do you illegally use drugs? ___________ Yes ________ No

How many days of leave from work did you take during the last twelve (12) months, other than paid holidays and paid vacation days? ____

Indicate how many lateness's you had during your last twelve (12) months of employment that were not a result of an accident, illness or injury:

☐ 0-5 ☐ 5-10 ☐ 10-15 ☐ more than 15

Indicate how many absences you had during your last twelve (12) months of employment that were not a result of accident, illness or injury:

☐ 0-5 ☐ 5-10 ☐ 10-15 ☐ more than 15

Have you ever been disciplined, suspended or fired for any reason by any of your employers during the last three (3) years?
_____ Yes _____ No

If yes, please specify the nature and extent of the discipline: _____

_____

_____

List all your job-related skills and qualifications and the types of equipment you can operate (i.e. languages, CPR, etc.)
_____

_____

_____

Professional References

Give below the names of three professional references not related to you, whom you have known at least one year

Name: _____

Address: _____ Phone No. _____

Business: _____ Years acquainted: _____

_ _

Name: _____

Address: _____ Phone No. _____

Business: _____ Years acquainted: _____

_ _

Name: _____

Address: _____ Phone No. _____

Business: _____ Years acquainted: _____

_ _

In case of emergency notify:

Name: _____

Address: _____ Phone No. _____

Agreement

I authorize investigation of all statements contained in this application and any resume provided to Penn Emblem Company. I authorize my former employers and schools that I have attended to release to Penn Emblem Company any and all information they may have which is relevant to my employment. I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment agreement with the Company. No promises regarding employment have been made to me, and I understand that no such promise or guaranty is binding upon the Company unless made in writing and signed by the Chief Executive Officer of the Company.

If I receive an offer for employment, I consent to take the company's Pre-employment drug and alcohol test for the use of illegal drugs and alcohol, and I understand that employment is contingent upon my taking this test.

I understand that any misrepresentation or omission of facts called for in this application or contained in my resume or during the interview process may result in the refusal of employment or, if employed, my immediate dismissal. Further, I understand and agree that if I am employed, my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice or stated reason, and I accept these conditions.

Date: _____ Signature: _____

This employment application will only be valid for ninety days from the date of the application. If you wish to be considered for employment after ninety days, please submit a new application.

Any information in this application will be used for employment purposes only.