

# Application for Employment

Qualified applicants receive consideration for employment without discrimination because of sex, marital status, race, color, creed, national origin, age or disability.

Conditions of employment are stated at the end of this form. Please read carefully before you sign this application. False statements on this application form shall be considered cause for termination.

This application expires 30 days after the date on which it is signed by applicant. No application will be considered nor will be valid without such signature.

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## PERSONAL INFORMATION

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

Name (print): \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Tel No: \_\_\_\_\_

In case of emergency notify: \_\_\_\_\_ Tel No: \_\_\_\_\_

Who referred you to our company? (Please check one.)

Employment agency: \_\_\_\_\_ Employee referral: \_\_\_\_\_ Newspaper Ad: \_\_\_\_\_ Other: \_\_\_\_\_

Are you related to anyone in our employ? Yes \_\_\_ No \_\_\_ If so, whom? \_\_\_\_\_ Relationship \_\_\_\_\_

If hired, can you provide documents required to prove you have the legal right to be employed in the USA Yes \_\_\_ No \_\_\_

Have you ever been convicted of any crime (excluding minor traffic violations) including DUI? Yes \_\_\_ No \_\_\_  
(Such conviction may be relevant if job-related, but does not bar you from employment.)

If yes, state the offense, location, date and disposition: \_\_\_\_\_

Do you have any physical or mental condition which may limit your ability to perform the particular job for which you are applying?

Yes \_\_\_ No \_\_\_. If yes describe this condition and how you can perform the job in spite of it: \_\_\_\_\_

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## EMPLOYMENT DESIRED

Position Desired: 1st Choice \_\_\_\_\_ 2nd Choice \_\_\_\_\_

Minimum acceptable salary \_\_\_\_\_ Date available to begin work \_\_\_\_\_

Have you worked here before? \_\_\_\_\_ Date \_\_\_\_\_ Have you applied here before? \_\_\_\_\_ Date \_\_\_\_\_

Would you have any problems getting to work on time, every day? \_\_\_\_\_

Do you have a current driver's license? Yes \_\_\_ No \_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_

## EDUCATIONAL BACKGROUND

Name and Location	Yrs/ Completed	Did You Graduate?	Course of Study
Elementary and Jr. High		Yes ___ No ___	
High School		Yes ___ No ___	
College		Yes ___ No ___	
Other		Yes ___ No ___	

Do you smoke? \_\_\_\_\_ Can you work without smoking? \_\_\_\_\_

## EMPLOYMENT HISTORY

Do we have permission to contact you listed references? Yes \_\_\_ No \_\_\_

List your last four employers assignments, starting with the most recent, including military service.

From	To	Employer	Telephone
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature of work performed, job responsibilities and equipment worked on.	
Reason for leaving		Hourly rate Start \$ _____ per _____ Final \$ _____ per _____	

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Please list any additional information that relates to your ability to perform the job which you have applied - such as licenses, professional, memberships, hobbies, etc., \_\_\_\_\_

If you worked in any of these positions under a different name, please give that name so we can check your work record.  
\_\_\_\_\_

Are you now or do you expect to be engaged in any other business or employment? Yes \_\_\_ No \_\_\_

We are committed to a Drug-Free Workplace Program and all applicants selected for job positions will be required to submit to a test for illegal substance use. No person found to have a confirmed positive test for an illegal substance will be extended an offer of employment.

*I certify that all the information provided on this application is true and complete. I understand that if it is found I purposely left out anything or misrepresented information, this application will be rejected or this could be grounds for dismissal after I am hired. I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.*

*I give the Employer the right to investigate all references and to secure additional information about me. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.*

Signature of Applicant

Date

**COMMERCIAL PRINTERS, INC**  
**PRE-EMPLOYMENT AGREEMENT**

**PLEASE READ CAREFULLY**

I freely and voluntarily agree to submit to a urinalysis (drug screen) as part of my application for employment. I understand that either refusal to submit to the urinalysis screen or failure to qualify according to the minimum standard established by the company for this screen may disqualify me from further consideration for employment.

I further understand, that upon commencement of employment with the company I may again be required to submit to a urinalysis screen. Failure to meet the minimum standards set for the screen will result in immediate termination.

I have read in full and understand the above statement and conditions of employment as outlined in the Applicant Letter (attached).

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

**Drivers License Information:**

State: \_\_\_\_\_

Drivers License # \_\_\_\_\_

## **COMMERCIAL PRINTERS, INC**

### **OPEN LETTER TO APPLICANTS**

We have committed Commercial Printers, Inc. to creating and maintaining a drug free workplace, pursuant to the Drug-Free Workplace requirements under Florida Statue S440.102.

Our policy now states:

1. Substance abuse will not be tolerated during working hours or on the premises of Commercial Printers, Inc., including the parking lots. This prohibition includes the possession, use, or sale of illegal drugs or alcohol. Employees who are found to be under the influence of illegal drugs or alcohol or who violate this policy in other ways will be terminated.
2. Applicant Testing
  - a. Applicants will be tested for illegal drug use prior to the assignment of any shifts, temporary or permanent placements.
  - b. Permanent staff applicants will be tested for drug use when they are considered to be a final candidate for a position, prior to being hired.
3. All applicants will be asked to sign Commercial Printers, Inc. Pre-employment Agreement(attached). Refusal to do so will terminate the application process and the applicant will not be considered for employment.
4. Applicants, whose drug tests are confirmed as positive will cause the applicant to not be considered for employment.

We are dedicated to providing a safe environment for all those that work at Commercial Printers, Inc. Casual illegal drug use will not be tolerated.