



APPLICATION FOR EMPLOYMENT

Mail or Deliver to:

106 Western Drive, Portland, TN 37148

Tel: (615) 325-5800 / Fax: (615) 325-1611

Date: _____

Personal

Name: _____
Last First Middle Initial

Present Address _____
No. Street City State Zip Code

Telephone _____ Alternate phone (cell) _____

Job applied for: _____ Rate of pay expected \$ _____ / _____

How did you learn of this opening? _____

If hired, on what date will you be available to work? _____

If hired, do you have reliable means of transportation to get to work? _____

Education Background

High School Completed Yes No If yes, what year completed? _____

College Diploma Yes No If yes, what diploma? _____

University Degree Yes No If yes, what degree? _____

Describe any specialized training, courses, or apprenticeship skills that you have acquired _____

I understand that neither this application nor any communication by a management representative is intended to create or does create a contract of employment, offer, or promise of employment for a definite term. I acknowledge that if hired by the company employment is on an At-Will basis in accordance with State law. This means the company is free to terminate my employment at any time, with or without cause or advance notice, in accordance with State law. Similarly I am free to terminate my employment with the company at any time for any reason. This At-Will provision may be modified or waived only in a written agreement signed by an authorized representative of the company and me. I agree to conform to the rules and regulations of the company, and I understand that the company has complete discretion to modify such rules and regulations at any time, except that it will not modify its policy of Employment At-Will or its arbitration policy, if any.

Prior Work History

List in order, last or present employer first.

1. Employer _____ Dates _____ - _____ To
Name Address From To

Rate of Pay _____
Start Finish

Supervisor _____
Name Title Phone #

Reason for Leaving _____

Job Description _____

2. Employer _____ Dates _____ - _____ To
Name Address From To

Rate of Pay _____
Start Finish

Supervisor _____
Name Title Phone #

Reason for Leaving _____

Job Description _____

3. Employer _____ Dates _____ - _____ To
Name Address From To

Rate of Pay _____
Start Finish

Supervisor _____
Name Title Phone #

Reason for Leaving _____

Job Description _____

May we contact the employers listed above? _____

If not, which one(s) do you do not wish us to contact? _____

Personal References

Give the names of 3 persons who can supply information pertinent to your job performance. Exclude former employers or relatives

1.	_____	_____	_____
	Name	Address	Phone #
2.	_____	_____	_____
	Name	Address	Phone #
3.	_____	_____	_____
	Name	Address	Phone #

Please note that Printworks employees are required to participate in a Fit for Work program and Printworks performs random Drug and Alcohol testing as part of that program.

Thank you for completing this application form and for your interest in employment with Printworks. We would like to assure you that your opportunity for employment with this company will be based only on your merit and on no other consideration. Human Rights legislation prohibits discrimination in employment because of race, ancestry, place of origin, color, national or ethnic origin, religion, creed, sex or sexual orientation, age, marital or family status, record of offenses, (including an offense in respect of any State or regional law), handicap, disability, or language. Printworks is an Equal Opportunity Employer.

Please Read Carefully

Applicant's Certification and Agreement

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. I also hereby certify that I give the company and it's agents authorization to confirm or verify the information I have given herein, within the limits of State or Federal law.

Signature of Applicant _____

Date _____

