



# PRINTING GROUP

65 West Madison Avenue Telford, PA 18969  
Phone 215.799.0500 Fax 215.799.0533

## APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Social Security No.			
Are you 18 years or older?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

DESIRED EMPLOYMENT	
Position Applied for	
Date Available	Desired Salary
Have you ever applied to this company before?	YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?
Last supervisor at this company	Reason for leaving
Who referred you to this company?	<input type="checkbox"/> Company web site <input type="checkbox"/> Employment agency <input type="checkbox"/> Newspaper advertising <input type="checkbox"/> Friend <input type="checkbox"/> Walk in <input type="checkbox"/> Other

EDUCATION				
High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

<b>GENERAL</b>	
Special skills	
Special training	

<b>REFERENCES</b>	
<i>Please list three professional references, to whom you are not related and have known for at least one year.</i>	
Full Name	Relationship
Company	Phone (     )
Address	
Full Name	Relationship
Company	Phone (     )
Address	
Full Name	Relationship
Company	Phone (     )
Address	

<b>MILITARY SERVICE</b>	
Branch	From                  To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

**PREVIOUS EMPLOYMENT***List below last three employers, starting with the most recent*

Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize investigation of all statements contained herein and the references and employers listed above to give Tiger Printing Group any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of that information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

Signature

Date