



Application For Employment

100% Employee Owned & Operated

We Are A Drug-Free Work Place • Your hiring is contingent on passing a drug test.

Date _____

Name _____

Address _____ City _____ State _____ Zip _____

How long at present address? _____ Telephone Number _____

Are you presently employed? _____ May we contact your present employer? _____

Have you ever applied for a job here before? Yes No If yes, when _____

Have you ever worked for this company before? Yes No If yes, when _____

Check position(s) applying for:

Counter Sales Press Operator Darkroom

Bindery Delivery Management

Desktop Publishing Office/Bookkeeping Key Operator

List skills or qualifications pertaining to position(s) applying for _____

Are you available to work:

Full Time Days Full Time Nights Part Time Days Part Time Nights Weekends Overnight

Number of hours available per week (circle one) 40 32 24

How far into the future are you available to work the hours indicated above?

Please indicate any hours or days that you cannot work _____

What is the best time to reach you at the above phone number? _____

Why are you interested in working for this company? _____

What reservations or considerations do you have about working for this company? _____

Describe the formal experience you have had in dealing with the public in a work setting, volunteer work, etc. _____

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

RECORD OF EDUCATION

School	Name and Location	Did You Graduate	If Yes, What Degree?
High School		<input type="checkbox"/> Yes	
		<input type="checkbox"/> No	
College		<input type="checkbox"/> Yes	
		<input type="checkbox"/> No	
Military/ Technical		Rank at Discharge	

RECORD OF EMPLOYMENT

List below all present and past employment beginning with your most recent.

Name and Address of Company And Type of Business	How Long Were You Employed There?	Hourly Rate / Salary		Reason for Leaving	Name of Supervisor
		Starting	Final		
	List duties and responsibilities:				
Telephone					

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PLEASE COMPLETE THE FOLLOWING: *(Show details of how you arrived at your answer)*

- | | |
|--|---|
| <p>1) Multiply 314 times 26.</p> <p>2) Divide 10,704 by 16.</p> <p>3) The total bill for 75 products is \$4,275.
What is the price per unit?</p> | <p>4) What is the sum of the following numbers?
42, 19, 362, 86, 41, 191, 87 and 55?</p> <p>5) What is 15% of 80?</p> <p>6) Multiply 109.8 times 12.85.</p> |
|--|---|

Have you been convicted of a felony or released from prison within the past five years?

Yes No

In the past five years, have you been fired from a job or resigned after being told you would be fired?

Yes No

What is important to you in a job? _____

What are your plans for continued study? _____

How do you spend your "spare" time? (hobbies, interests, volunteer work, organizations, clubs).

Answering this question is optional. _____

Do you have reliable transportation to get to and from work? Yes No

How would your personal and/or professional goals be forwarded by working for this company? _____

PERSONAL REFERENCES (Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number

AGREEMENT: PLEASE READ THE FOLLOWING AND SIGN YOUR NAME BELOW...

In compliance with Federal and State Equal Employment Opportunity Laws, qualified applicants are considered for all positions applied for without regard to race, color, religion, sex, national origin, age, veteran's status, marital status, disability, or handicap, or any other legally protected status.

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

In the event of employment, I understand that false or misleading information given in my application or interview(s) can result in immediate discharge and that my first three months of employment will be probationary. I state my understanding that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the Company or myself. I also understand that no manager or representative of Renaissance Printing, other than the president 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. I also understand that neither a safety manual nor an employee handbook nor any other Renaissance Printing publication changes this at-will relationship.

I understand that unless otherwise prohibited by applicable law, I may be required at any time to submit to a physical, urinalysis, or other examination as a condition of my employment with the Company, including a pre-employment urinalysis drug test. By accepting employment, I agree to submit to such examinations or tests as required by the Company, all at Company expense.

I authorize you to make such investigations and inquiries of my personal, employment or financial history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

INCOMPLETE APPLICATION FORMS WILL NOT BE CONSIDERED.

If your application is considered favorably, on what date will you be available for work? _____ 2 _____

Signature of Applicant

Date

Additional information on back.

EMPLOYMENT CONDITIONS

PLEASE READ CAREFULLY

Renaissance Printing has my permission to obtain all necessary information concerning my prior employment, from the references I have listed, or any other sources. I release all parties from any possible damages resulting from disclosure of such information with/without prior written notice from me. I reserve the right to know the names and addresses of any investigative agencies used, in order that I may learn the information contained in any reports furnished to Renaissance Printing.

Since certain locations of Renaissance Printing are in operation 24 hours a day, seven days a week, overtime, shift assignment change, rotation of shifts and weekend and/or holiday work may be mandatory. If accepted for employment, I agree to abide by the rules and policies of the corporation.

I understand this application does not constitute an employment contract of any kind. Should I be employed by Renaissance Printing, I may resign such employment at any time at my discretion with or without prior notice, and the corporation may terminate my employment at their discretion, with or without cause and with or without prior notice.

I further understand that no representative of the employer has any authority to enter into any agreement with me for employment for any specific period of time, or to make any agreement contrary to the rules and policies of the employer.

Additionally, I understand that, upon commencement of employment with Renaissance Printing, I may again be required to submit to a drug and/or alcohol test. Refusal to take a requested test, or failure to meet the required minimum standards set for the test may result in immediate suspension and/or discharge.

I have read the foregoing statements in full. I understand these statements and agree to the conditions of employment.

Date: _____ Applicant Signature: _____

Print Name: _____