

Application for Employment



MEXICO PLASTIC • CONTINENTAL BAG

PERSONAL			
Last Name	First	Middle	Date
Street Address			Home Telephone ()
City	State	Zip Code	Business Telephone ()
Have you ever employed by us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes; Month and Year			Social Security #
Are there any shifts which you can not work?			Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally eligible for employment in the United States?			When will you be available to begin work?
Special training or skills (languages, machine operations, etc.)			

EDUCATION					
School	Name & Location of School	Course of Study	Number of Years Completed	Did You Graduate ?	Degree or Diploma
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business/Trade/ Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Membership in Professional or Civic Organizations
(Excluded those which may disclose your race, color, religion or national origin)

Type of work desired?	Desired Pay?
How were you referred to our organization?	Do you have any relatives who are employed by this organization? <input type="checkbox"/> Yes <input type="checkbox"/> No Please specify:

Is there any information we would need about your name or use of another name for us to be able to check your work record? <input type="checkbox"/> Yes <input type="checkbox"/> No Please specify:
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EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

1	Company Name	Telephone ()
	Address	Employed - Month/ Year From: To:
	Name of Supervisor	Hourly Pay Starting: Last:
	Job Title and Job Description	Reason for leaving:

2	Company Name	Telephone ()
	Address	Employed - Month/ Year From: To:
	Name of Supervisor	Hourly Pay Starting: Last:
	Job Title and Job Description	Reason for leaving:

3	Company Name	Telephone ()
	Address	Employed - Month/ Year From: To:
	Name of Supervisor	Hourly Pay Starting: Last:
	Job Title and Job Description	Reason for leaving:

4	Company Name	Telephone ()
	Address	Employed - Month/ Year From: To:
	Name of Supervisor	Hourly Pay Starting: Last:
	Job Title and Job Description	Reason for leaving:

We may contact the employers listed above unless you indicate.	DO NOT CONTACT
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Is there anything that would prevent you from performing any of the essential tasks of the job for which you are applying, with or without reasonable accommodation? Yes No

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? Yes No If "Yes" describe in full.

MILITARY	Did you serve in the US Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, in what Branch?
Did you receive any training that would be beneficial to the position you are applying for?		

PERSONAL REFERENCES					
	Name	Address	Phone #	Occupation	Years Known
1					
2					
3					
4					

This application will be on file for only 30 days unless updated.

NOTICE

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, disability or veteran status.

AGREEMENT

I certify that the statements made in this application are correct and complete to the best of my knowledge.

I understand that false or misleading information may result in termination of employment.

I authorize Continental Products (Mexico Plastic/Continental Bag) to conduct a reference check so that a hiring decision may be made. Continental Products (Mexico Plastic/Continental Bag) may contact the schools I have attended for the release of my educational records including transcripts, disciplinary actions, and verification of attendance. This information should be released in the same manner as would be permitted if I presented myself for this purpose, and I agree to hold harmless any agency, employer, institution, organization, or individual for release of information. If unable to verify any reference stated on this application, it is my responsibility to furnish the necessary documentation.

DISCLAIMER

If accepted for employment with Continental Products (Mexico Plastic/Continental Bag), I agree to abide by all of policies and procedures. If employed, I understand that I may terminate my employment at any time without notice or cause. In consideration of my employment, I agree to conform to the rules and regulations of the Employer. I understand that no representative of the Employer, other than the President and Human Resources Officer, has any authority to enter into any agreement, oral or written, for employment for any specified period of time or to make any agreement or assurances contrary to this policy. If employed, I understand that my employment is for no definite period of time and, if terminated, the Employer is liable only for wages and salary earned as of the date of termination.

Signed _____ Date _____