

PERSONAL REFERENCES

Please provide 3 personal references. Do not include relatives or former employers.

1	Name	Years Known
	Address	Telephone ()
	Occupation	
2	Name	Years Known
	Address	Telephone ()
	Occupation	
3	Name	Years Known
	Address	Telephone ()
	Occupation	

Have you ever been convicted of a crime [excluding misdemeanors and summary offenses] that has not been annulled, expunged or sealed by a court? (A conviction is not an automatic bar to employment.)

Yes No *If yes, describe in full.*

PLEASE READ AND SIGN BELOW

The information contained in this Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal at any time during my employment.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue my employment in the future.

Signature of Applicant _____ Date Signed _____

FOR HUMAN RESOURCES USE ONLY
Do not write below this line

Date of Hire _____

Date Interviewed _____ Interviewed By _____

Date Interviewed _____ Interviewed By _____



application for employment

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

Last Name	First	Middle	Date
Street Address			Daytime Phone ()
City / State / Zip			Other Phone ()
Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes: Month/Year Location</i>			Social Security # (optional)
Position Desired			Pay Expected
Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If not, what hours can you work?</i>			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			When are you available to begin work?
Do you have any relatives who are presently [or have formerly been] employed by VELOCITY Print Solutions? <input type="checkbox"/> Yes <input type="checkbox"/> No			
How were you referred to VELOCITY Print Solutions?			

EDUCATION	<i>School</i>	<i>Name / Location</i>	<i>Course of Study</i>	<i># of Years Completed</i>	<i>Did You Graduate?</i>	<i>Degree or Diploma</i>
	High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Business / Trade / Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
List any certifications or specialized training you have received [machine operation, computer applications, etc.]						

EMPLOYMENT

Please provide accurate, complete full-time and part-time employment history. Start with your present or most recent employer. This section must be filled out completely, even if submitting a resume with your application.

1	Company Name	Telephone ()
	Address	Employed [month & year] From To
	Manager's Name	Pay <input type="checkbox"/> hourly / <input type="checkbox"/> yearly \$
	Description of Position	Job Title
	Reason for Leaving	OK to Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, list reason:</i>

2	Company Name	Telephone ()
	Address	Employed [month & year] From To
	Manager's Name	Pay <input type="checkbox"/> hourly / <input type="checkbox"/> yearly \$
	Description of Position	Job Title
	Reason for Leaving	OK to Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, list reason:</i>

3	Company Name	Telephone ()
	Address	Employed [month & year] From To
	Manager's Name	Pay <input type="checkbox"/> hourly / <input type="checkbox"/> yearly \$
	Description of Position	Job Title
	Reason for Leaving	OK to Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, list reason:</i>

4	Company Name	Telephone ()
	Address	Employed [month & year] From To
	Manager's Name	Pay <input type="checkbox"/> hourly / <input type="checkbox"/> yearly \$
	Description of Position	Job Title
	Reason for Leaving	OK to Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, list reason:</i>

MILITARY

Did you serve in the US Armed Forces? Yes No

Which branch(s)?

Describe any training received relevant to the position for which you are applying.

COMPUTER KNOWLEDGE

Please rate your computer knowledge below. Not all computer applications are necessary for all positions.

PROGRAM	ADVANCED	INTERMEDIATE	BEGINNER	NONE
Email [Outlook] / Internet				
Microsoft Windows version: _____				
Microsoft Word version: _____				
Microsoft Excel version: _____				
Microsoft PowerPoint version: _____				
Microsoft Access version: _____				
Adobe Acrobat/PDF Creation				
Mac OS				
QuarkXPress version: _____				
Adobe InDesign version: _____				
Adobe PhotoShop version: _____				
Adobe Illustrator version: _____				
Accounting Software [i.e. Peachtree, etc.]				
Other Applications [Please List]				