

EMPLOYMENT APPLICATION FORM

PERSONAL INFORMATION

Full Name: _____ Social Security # _____

Address: _____ City: _____ State: _____

Home Phone # _____ Cell Phone # _____

Are you eligible to work in the United States? Yes No

Can you submit verification of you legal right to work in the United States? Yes No

Have you ever been convicted of or pleaded no contest to a felony? Yes No

If yes, please explain: _____

Are you currently employed? Yes No

If yes, may we contact your employer? Yes No

Employment sought: Full Time Part Time

Date you can begin: _____ Desired Salary: _____

ANSWER AS THOROUGHLY AS POSSIBLE:

What specific experience do you have in the reprographics field? (include specific copiers / machines and other equipment used, bindery experience, software and computer experience, and positions held) _____

What are your career goals? _____

Explain how your previous reprographics experience will be a benefit to Horizon Reprographics? _____

EDUCATION

High School: _____ Location: _____ Graduate?: Yes No

College: _____ Location: _____ Graduate?: Yes No

Major: _____

College: _____ Location: _____ Graduate?: Yes No

Major: _____

Trade / Graduate School: _____ Location: _____ Graduate?: Yes No

Major: _____

EMPLOYMENT HISTORY (most recent first)

Company: _____ Supervisor: _____ Position: _____

Address: _____ Telephone: _____

Responsibilities: _____

Dates of Employment: _____ Reason for Leaving: _____

Company: _____ Supervisor: _____ Position: _____

Address: _____ Telephone: _____

Responsibilities: _____

Dates of Employment: _____ Reason for Leaving: _____

Company: _____ Supervisor: _____ Position: _____

Address: _____ Telephone: _____

Responsibilities: _____

Dates of Employment: _____ Reason for Leaving: _____

Company: _____ Supervisor: _____ Position: _____

Address: _____ Telephone: _____

Responsibilities: _____

Dates of Employment: _____ Reason for Leaving: _____

REFERENCES (list individuals, unrelated to you, who are familiar with your reprographics skills)

Name: _____ Company: _____ Telephone: _____

Address: _____ Years Acquainted: _____

Name: _____ Company: _____ Telephone: _____

Address: _____ Years Acquainted: _____

Name: _____ Company: _____ Telephone: _____

Address: _____ Years Acquainted: _____

I certify that the information contained in this application is true and complete to the best of my knowledge. I also understand that any false information contained on this application may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification or any or all information listed in this application. Please fax this completed form to 303-623-2136.

Name: _____ Signature: _____ Date: _____