



# APPLICATION FOR EMPLOYMENT

Please print all information requested except signature.

## APPLICANT INFORMATION

FIRST NAME  MI  LAST NAME

ADDRESS  CITY  STATE  ZIP

HOME PHONE  CELL PHONE  EMAIL ADDRESS

## DESIRED EMPLOYMENT

DATE OF APPLICATION  POSITION APPLIED FOR

SALARY RANGE REQUESTED  HOW WERE YOU REFERRED TO OEC GRAPHICS, INC.?

HAVE YOU EVER APPLIED FOR EMPLOYMENT WITH US BEFORE? IF SO, WHEN?  IF HIRED, CAN YOU PROVIDE PROOF OF YOUR ELIGIBILITY TO WORK IN THE U.S.A.? YES  NO

## TYPE OF EMPLOYMENT DESIRED (LIST ALL APPLICABLE)

FULL-TIME  PART-TIME  TEMPORARY  | 1ST SHIFT  2ND SHIFT  3RD SHIFT

## EDUCATIONAL BACKGROUND

HIGH SCHOOL	YEARS ATTENDED <input type="text"/>	DID YOU GRADUATE? <input type="text"/>	DEGREE OR COURSE OF STUDY <input type="text"/>
TECHNICAL	YEARS ATTENDED <input type="text"/>	DID YOU GRADUATE? <input type="text"/>	DEGREE OR COURSE OF STUDY <input type="text"/>
COLLEGE	YEARS ATTENDED <input type="text"/>	DID YOU GRADUATE? <input type="text"/>	DEGREE OR COURSE OF STUDY <input type="text"/>

## SKILLS - APTITUDE - CERTIFICATIONS

LIST ANY SKILLS AND/OR APTITUDES ACQUIRED FROM EMPLOYMENT EXPERIENCES:

OEC GRAPHICS, INC. IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

## PREVIOUS EMPLOYMENT RECORD (STARTING WITH MOST RECENT)

COMPLETING THIS SECTION IS REQUIRED EVEN IF YOU SUBMIT A RESUME.

EMPLOYER	JOB TITLE
<input type="text"/>	<input type="text"/>
FROM (MONTH / DATE / YEAR)	TO (MONTH / DATE / YEAR)
<input type="text"/>	<input type="text"/>
ADDRESS	TELEPHONE
<input type="text"/>	<input type="text"/>
SUPERVISOR AND TITLE	REASON FOR LEAVING
<input type="text"/>	<input type="text"/>
MAY WE CONTACT THE EMPLOYER?	
YES <input type="radio"/> NO <input type="radio"/>	

EMPLOYER	JOB TITLE
<input type="text"/>	<input type="text"/>
FROM (MONTH / DATE / YEAR)	TO (MONTH / DATE / YEAR)
<input type="text"/>	<input type="text"/>
ADDRESS	TELEPHONE
<input type="text"/>	<input type="text"/>
SUPERVISOR AND TITLE	REASON FOR LEAVING
<input type="text"/>	<input type="text"/>
MAY WE CONTACT THE EMPLOYER?	
YES <input type="radio"/> NO <input type="radio"/>	

EMPLOYER	JOB TITLE
<input type="text"/>	<input type="text"/>
FROM (MONTH / DATE / YEAR)	TO (MONTH / DATE / YEAR)
<input type="text"/>	<input type="text"/>
ADDRESS	TELEPHONE
<input type="text"/>	<input type="text"/>
SUPERVISOR AND TITLE	REASON FOR LEAVING
<input type="text"/>	<input type="text"/>
MAY WE CONTACT THE EMPLOYER?	
YES <input type="radio"/> NO <input type="radio"/>	

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## READ CAREFULLY

By signing this application for employment, I am confirming my understanding with the following and agree that:

I authorize the OEC Graphics, Inc. (henceforth referred to as 'company') to contact any past or present employers with respect to my experience and qualifications. I specifically consent to disclosure in accordance with the provisions of the Privacy Act of 1974 and similar federal and state laws. Consequently, I hereby release and discharge my past and present employer(s) from any liability and damage arising out of their actions in releasing such information to the company. In addition, a copy of this authorization is as valid as the original and should be recognized as such;

The information provided in this application or attached resume is true, correct, and complete to the best of my knowledge, and that any false statement, omission, or misrepresentation of the facts shown by me will be sufficient cause for both cancellation of this application and/or separation from employment if discovered after being employed;

Nothing contained in this application, nor conveyed during interviews or in any offer of employment, is to be construed as a contract of employment and any promises or guarantees made to the contrary by any person at the company which is not put in writing are not binding;

Under applicable "Employment at will" law, if hired, I am free to resign at any time and, likewise, that the company may terminate my employment at any time, with or without cause or prior notice;

All applicants will receive consideration without regard to an individual's race, color, national or ethnic origin, religion, age, sex, gender, sexual orientation, marital status, veteran status, disability, or any other proscribed category set forth in federal or state regulations;

If offered employment, either at that time or whenever subsequently deemed as necessary by the company as a condition for continuing my employment under "drug-free workplace" rules, I am agreeing in advance to submit to any medical examination or drug testing at company expense as is permitted by law and where administered under the specific rules for maintaining confidentiality and other regulations that apply;

If hired, I will follow all company work rules, policies, and procedures, and that the company retains the right to revise them in whole, or in part, at any time;

This application is valid for 6 months. After that time, if I have not heard from the company and still wish to be considered for employment, it will be necessary for me to complete a new application.

**Signature of Applicant**

**Date**