

ARCHITECTURAL POLYMERS INC.
1220 Little Gap Road
Palmerton, Pa 18071
Phone 610-824-3322- Fax 610-824-3777

APPLICATION FOR EMPLOYMENT

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

NAME _____ DATE _____

STREET ADDRESS _____

CITY, STATE, ZIP _____

SOCIAL SECURITY # _____

DRIVERS LIC# _____

PHONE # _____

EDUCATION:

Name/Location	Graduated	Degree/Diploma
High School _____		
College _____		
Vocational School _____		

In case of emergency, notify spouse or other person:

Name: _____ Address _____

Phone: _____ Relationship _____

Wage desired? _____

Referred by _____

REFERENCES: List three people not related to you

	NAME	ADDRESS	PHONE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

PERSONAL INFORMATION:

Are you at least 18 years of age? _____

Are you available to work overtime? _____

On what date would you be available to work? _____

Type of work applying for _____

Apart from religious observances, are you available for full time work? _____

Have you ever been convicted of a felony within the last seven years? _____

Conviction will not necessarily disqualify an applicant from employment

If yes, explain: _____

Are you legally eligible to work in the United States? _____

Are you currently employed? _____

If yes, may we contact your employer? _____

EMPLOYMENT:

1. Company
Name: _____ Phone _____
Address _____
Supervisor: _____
Position and duties: _____
Date of Employment: _____
Weekly pay: Start: _____ Last: _____
Reason for leaving: _____

2. Name: _____ Phone _____
Address _____
Supervisor: _____
Position and duties: _____
Date of Employment: _____
Weekly pay: Start: _____ Last: _____
Reason for leaving: _____

MILITARY:

If you served in the U.S. Armed Forces, what branch? _____
Date of enlistment: _____ Discharge _____
Describe any specialized training courses _____
Please list any awards or commendation received _____
Did you receive an Article 15 or more serious discipline? _____
If yes, explain _____
Discharge status: _____

Customer Service Objective:

I certify that the information contained in this application is correct to the best of my knowledge. I authorize _____ and their agents to investigate my previous work history including, but not limiting to, inquiries into my attendance/lateness record, attitude, work performance, etc. I understand that, under company policy, falsification of this application in any detail is grounds for disqualification from further consideration or dismissal from employment. I agree to conform to the rules of this company. I understand that if hired I will be employed "at will" and the company or I can end my employment and compensation with or without cause, and with or without notice, at any time.

By signing this, I acknowledge that I understand and agree with the above information.

Signature _____ Date _____