

**PORT ERIE PLASTIC, INC.**  
**APPLICATION FOR EMPLOYMENT**

*Port Erie Plastics is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status. This application for employment is good for 6 months only. Consideration for employment after 6 months requires a new application.*

**PERSONAL RECORD**

Name (print)			Date
Last	First	Middle	
Present Address			Phone
Number & Street	City	State	Zip
Are you at least 18 years of age? ____ Yes ____ No		Social Security Number	
Are you legally eligible for employment in the United States? ____ Yes ____ No (If offered employment, you will be required to provide documentation to verify eligibility.)			
Have you ever been convicted of a crime or been disciplined or discharged for a violation of work rules, safety rules, harassment, or related unacceptable behavior? ____ Yes ____ No If yes, give particulars			
(A conviction will not necessarily disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.)			

**EDUCATIONAL RECORD**

Name & Address	Highest Grade Completed	Did you graduate?	
Elementary School			
High School			
College or University		Major	Degree
Apprentice, Vocational, Business or Graduate School?			
Other training, factory or office machines operated?			

**JOB INTEREST**

Position desired	
Other positions for which you are qualified	
Are you now employed? ____ Yes ____ No	Employer's name & address
Date available	May we contact your present employer? ____ Yes ____ No
Have you ever worked here before? ____ Yes ____ No	If yes, please give dates
Do you have any relatives working here? ____ Yes ____ No	If yes, give names and relationship

**MILITARY RECORD**

Have you ever served in the U. S. Armed Forces? ____ Yes ____ No	Branch	# of yrs
Rank or Rate	Service schools / special experience	
Reserve or National Guard Status		

## REFERENCES

	Name	Address	Phone	Occupation	Verification
1					
2					
3					

## EMPLOYMENT HISTORY

Dates (start - end)	Employer's Name & Address	Position	Supervisor	Wages (start and end)	Reason for leaving

## PRE-EMPLOYMENT STATEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Port Erie Plastics to verify their accuracy and to obtain reference information on my work performance. I hereby release Port Erie Plastics from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of Port Erie Plastics. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or Port Erie Plastics may terminate my employment at any time with or without notice of cause.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

By checking the following box you are electronically accepting Port Erie Plastics Pre-Employment Statement

## PORT ERIE PLASTICS CONDUCTS POST-EMPLOYMENT DRUG SCREENING

I have read Port Erie Plastics' Drug and Alcohol Abuse Policy. I understand that I have been asked by the Company to submit a sample of my urine for chemical analysis pursuant to the Policy. I further understand that the purpose of this analysis is to determine the presence or absence of illegal drugs.

I consent freely and voluntarily to the Company's request for this specimen. I hereby release and hold harmless the Company and its employees and agents from any liability whatsoever arising from this request to furnish my specimen and the testing of my specimen.

I also hereby consent to the testing laboratory providing to the Company the results of the test.

I fully understand that a positive test result will result in immediate termination from Port Erie Plastics.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

By checking the following box you are electronically accepting Port Erie Plastics Drug Screening policy

Rev 08/30/05

**Port Erie Plastics Is A Non Smoking Facility**