



# EMPLOYMENT APPLICATION

120 Racine Dr. Unit 3, Wilmington, NC 28403  
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 www.allwaysgraphics.com

*Thank you for your interest in a career with All Ways Graphics. Detailed information about your background and work history will assist us in placing you in a position that best suits your qualifications.*

NAME		DATE	
ADDRESS		TELEPHONE	
CITY, STATE, ZIP		Soc. Sec. No.	
HAVE YOU PREVIOUSLY APPLIED TO THIS COMPANY If yes, list date(s) & location(s)		If related to anyone in our employ, state name and dept.	
POSITION APPLYING FOR		ARE YOU EMPLOYED NOW?	DESIRED PAY
FULL TIME <input type="checkbox"/> Y <input type="checkbox"/> N PART TIME <input type="checkbox"/> Y <input type="checkbox"/> N FLEXIBLE <input type="checkbox"/> Y <input type="checkbox"/> N	HOURS/DAYS	WILLING TO WORK OVERTIME <input type="checkbox"/> Y <input type="checkbox"/> N	DATE AVAILABLE
DO YOU SPEAK ANY FOREIGN LANGUAGES?	HAVE YOU HAD ANY PRIOR INSTANT PRINTING EXPERIENCE? (Describe)		
WHAT MACHINES CAN YOU OPERATE?	LIST SPECIAL TRAINING/SKILLS		
HOW DID YOU LEARN OF OUR ORGANIZATION?	IN CASE OF EMERGENCY NOTIFY		

## EMPLOYMENT LIST EMPLOYERS STARTING WITH PRESENT OR MOST RECENT

<b>1. COMPANY</b>		FROM	TO
ADDRESS		TELEPHONE	
JOB TITLE	SUPERVISOR	BEGINNING SALARY	ENDING SALARY
DUTIES			
REASON FOR LEAVING			
<b>2. COMPANY</b>		FROM	TO
ADDRESS		TELEPHONE	
JOB TITLE	SUPERVISOR	BEGINNING SALARY	ENDING SALARY
DUTIES			
REASON FOR LEAVING			
<b>3. COMPANY</b>		FROM	TO
ADDRESS		TELEPHONE	
JOB TITLE	SUPERVISOR	BEGINNING SALARY	ENDING SALARY
DUTIES			
REASON FOR LEAVING			

Do you have any experiences or qualifications other than those positions indicated above? _____ _____ _____	We may contact the employers listed above unless you indicate below those you do not want us to contact. Company Number(s) _____ Reason _____ _____ _____
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## EDUCATION

NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	LAST YEAR COMPLETED	GRADUATE ✓	DEGREE OR DIPLOMA
GRAMMAR		5 6 7 8		
HIGH		1 2 3 4		
COLLEGE		1 2 3 4		
TRADE		1 2 3 4		
OTHER		1 2 3 4		



All Ways Graphics is an Equal Opportunity Employer. Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

## OTHER

Are you at least 18?  Y  N

Have you ever been bonded? (If yes, with what employer?) \_\_\_\_\_

Have you ever been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? (If yes, describe in full) \_\_\_\_\_

Are you, with or without accommodation, able to perform the job for which you are applying? \_\_\_\_\_

## REFERENCES

LIST THE NAMES OF THREE PERSONS NOT RELATED TO YOU WHO YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS	TELEPHONE	CHECK TYPE OF RELATIONSHIP		
			SUPERVISOR	CO-WORKER	FRIEND

What do you feel you could offer All Ways Graphics? \_\_\_\_\_

What are your employment goals for the future:

One year from now? \_\_\_\_\_

Five years from now? \_\_\_\_\_

What type of work do you like doing most? \_\_\_\_\_

What do you expect from your supervisor? \_\_\_\_\_

What should your supervisor expect from you? \_\_\_\_\_

Nothing in this application, in All Ways Graphics' employee handbook, or in any other written statements of All Ways Graphics general policies and procedures shall be construed or interpreted to constitute an employment contract between All Ways Graphics and any prospective employee. All Ways Graphics in its sole discretion reserves the unconditional right to terminate any person's employment at any time and for any reason. All Ways Graphics also reserves the unconditional right to modify, delete or make any exception to any of its policies and procedures with or without notice at any time and for any reason. Oral statements, representations or promises contrary to the foregoing, including promises of employment for any specified period of time, and are not binding upon All Ways Graphics unless confirmed in writing by the President of All Ways Graphics.

My signature below certifies that I have read the foregoing.

Date \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

**THE INFORMATION PROVIDED BY ME IN THIS APPLICATION FOR EMPLOYMENT IS VALID AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL.**

Date \_\_\_\_\_

Applicant's Signature \_\_\_\_\_