



LIBERTY GRAPHICS

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

FULL NAME: _____ **DATE:** _____
First Middle Last

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

E-MAIL: _____ **PHONE:** _____

POSITION APPLIED FOR: _____

DATE AVAILABLE TO START IF HIRED: _____

EMPLOYMENT DESIRED: FULL-TIME PART-TIME SEASONAL

EMPLOYMENT ELIGIBILITY

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S.? YES NO*

HAVE YOU EVER WORKED FOR THIS EMPLOYER? YES* NO

IF YES, WRITE THE START AND END DATES: _____

ARE YOU ABLE TO COMPLETE THE ESSENTIAL FUNCTIONS OF THE JOB, WITH OR WITHOUT REASONABLE ACCOMMODATIONS? YES NO

EDUCATION

HIGH SCHOOL: _____ **CITY / STATE:** _____

GRADUATE? YES NO **DIPLOMA:** _____

COLLEGE: _____ **CITY / STATE:** _____

GRADUATE? YES NO **DEGREE:** _____

ADVANCED DEGREE: _____ **CITY / STATE:** _____

GRADUATE? YES NO **DEGREE:** _____

PREVIOUS EMPLOYMENT (REQUEST MORE PAGES, IF NECESSARY)

EMPLOYER 1: _____
Company / Individual

E-MAIL: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYER 2: _____
Company / Individual

E-MAIL: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYER 3: _____
Company / Individual

E-MAIL: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

REFERENCES

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

COMPANY: _____ **TITLE:** _____

E-MAIL: _____ **PHONE:** _____

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

COMPANY: _____ **TITLE:** _____

E-MAIL: _____ **PHONE:** _____

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

COMPANY: _____ **TITLE:** _____

E-MAIL: _____ **PHONE:** _____

MILITARY SERVICE

ARE YOU A VETERAN? YES NO

BRANCH: _____ **RANK AT DISCHARGE:** _____

FROM: _____ **TO:** _____

TYPE OF DISCHARGE: _____

IF NOT HONORABLE, PLEASE EXPLAIN: _____

HOW DID YOU LEARN ABOUT THIS POSITION?

Where did you learn about our positions? Facebook Indeed Chamber of Commerce Other

If Other, please explain: _____

HAVE YOU EVER BEEN ASKED TO RESIGN FROM A PREVIOUS JOB?

YES* NO If YES, please explain: _____

DISCLAIMER

Applicant understands that Liberty Graphics is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true, honest, and complete to the best of my knowledge. If this application leads to my eventual employment, I understand that any false, omitted, or misleading information in my application or interview may result in my employment being terminated.

I authorize Liberty Graphics to conduct a check of my previous work and education history and to contact any prior employers.

SIGNATURE _____ DATE _____

PRINT NAME _____