



Application For Employment

Name of Applicant _____

(PLEASE PRINT AND **COMPLETELY** ANSWER **ALL** QUESTIONS – EVEN IF YOU ATTACH A RESUME')

Lawrence Plastics fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, disability, or any other basis prohibited by federal, state, or local law. In accordance with requirements of the Americans With Disabilities Act, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As Equal Opportunity Employers, we intend to comply fully with applicable federal and State employment laws and the information requested on this application will only be used for purposes consistent with those laws. Applications are accepted for positions currently available, and will only be considered for thirty (30) days from today's date, or until the position is filled, whichever occurs first.

Application Date: _____

POSITION APPLIED FOR: _____ Salary expectations: _____

PERSONAL DATA:

Last Name	First Name	Middle	() -
Street Address	City	State/Zip Code	Telephone #

Are you over the age of 18? **Yes** **No** If no, a work permit will be required)

Are there any days, shifts, or hours you **WILL NOT** work? **Yes** **No** . If Yes, please explain: _____

Will you work overtime, if required? **Yes** **No** . When will you be able to start work? _____

Have you ever been a defendant in a civil action for an intentional tort (intentional commission of a wrongful act)? **Yes** **No** .
Note: Answering "Yes" does not automatically exclude you from further consideration for the position.

If Yes, include the nature of the intentional tort and the disposition of the action: _____

How did you learn of our Company? Friend/Family Employed here _____
Name of Friend/Family Member

Internet Newspaper Driving by Other _____
Describe

If referral, WHO were you referred by: _____

Have you ever applied for or worked at **Lawrence Plastics**? **Yes** **No** . If yes, provide dates: _____

Are you legally authorized to work in the United States? **Yes** **No** .

Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status)? **Yes** **No** .

NOTE: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

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DRIVING RECORD: (Please answer completely)

Do you have a reliable method of getting to work? **Yes** **No** _____

RESIDENCES: Please provide your addresses of residence for the past seven years beginning with the most recent address.

Address _____ City, State, Zip Code _____ / _____ / _____ From _____ To _____

Address _____ City, State, Zip Code _____ / _____ / _____ From _____ To _____

Address _____ City, State, Zip Code _____ / _____ / _____ From _____ To _____

Address _____ City, State, Zip Code _____ / _____ / _____ From _____ To _____

Address _____ City, State, Zip Code _____ / _____ / _____ From _____ To _____

EDUCATION: (May or may not be considered depending on job applied for.) Please describe any educational degrees, skills, training or experience you believe are relevant to the job applied for.

HIGH SCHOOL:

Name _____ City, State _____ Yes No
Graduated _____ Grade Point Avg _____

COLLEGE OR UNIVERSITY:

Name _____ City, State _____ Yes No
Graduated _____ Grade Point Avg _____

TECHNICAL SCHOOL/GED:

Name _____ City, State _____ Yes No
Graduated _____ Grade Point Avg _____

LICENSES / CERTIFICATIONS / OTHER:

EMPLOYMENT HISTORY: You MUST complete the entire employment history even if you attach a resume'.
 (Please complete for all full-time or part-time employment beginning with the most recent employer. You may include as part of your employment history any verified work performed on a volunteer basis.)

Company Name:			<i>Phone Number</i>	
			() -	
<i>Address</i>	<i>City, State</i>	<i>Dates Employed : From To</i>		
			() -	
<i>Name of Supervisor</i>	<i>May we contact?</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Rate of Pay: Beginning</i>		<i>Ending</i>
		\$	\$	
<i>State job titles and describe job duties:</i>		<i>Reason for Leaving:</i>		

Company Name:			<i>Phone Number</i>	
			() -	
<i>Address</i>	<i>City, State</i>	<i>Dates Employed : From To</i>		
			() -	
<i>Name of Supervisor</i>	<i>May we contact?</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Rate of Pay: Beginning</i>		<i>Ending</i>
		\$	\$	
<i>State job titles and describe job duties:</i>		<i>Reason for Leaving:</i>		

Company Name:			<i>Phone Number</i>	
			() -	
<i>Address</i>	<i>City, State</i>	<i>Dates Employed : From To</i>		
			() -	
<i>Name of Supervisor</i>	<i>May we contact?</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Rate of Pay: Beginning</i>		<i>Ending</i>
		\$	\$	
<i>State job titles and describe job duties:</i>		<i>Reason for Leaving:</i>		

Company Name:

Phone Number

		()	-
<i>Address</i>	<i>City, State</i>	<i>Dates Employed : From</i>	<i>To</i>

<i>Name of Supervisor</i>	<i>May we contact?</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Rate of Pay: Beginning</i>	<i>Ending</i>
		\$	\$

State job titles and describe job duties: Reason for Leaving:

Company Name:

Phone Number

		()	-
<i>Address</i>	<i>City, State</i>	<i>Dates Employed : From</i>	<i>To</i>

<i>Name of Supervisor</i>	<i>May we contact?</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Rate of Pay: Beginning</i>	<i>Ending</i>
		\$	\$

State job titles and describe job duties: Reason for Leaving:

Company Name:

Phone Number

		()	-
<i>Address</i>	<i>City, State</i>	<i>Dates Employed : From</i>	<i>To</i>

<i>Name of Supervisor</i>	<i>May we contact?</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Rate of Pay: Beginning</i>	<i>Ending</i>
		\$	\$

State job titles and describe job duties: Reason for Leaving:

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CRIMINAL RECORD INFORMATION

ALL Applicants **MUST** answer all four questions below. When answering the following questions, you may exclude any records expunged, annulled, sealed, discharged, dismissed, erased under first-offender law, or otherwise eradicated by statute or court order. Also note if you are hired, and we find during our background search that if you did NOT answer the questions or did NOT answer them truthfully, we retain the right to terminate your employment immediately due to making false statements or falsifying records in order to obtain employment.

A criminal conviction will not necessarily be a bar to employment, but will be considered in relation to specific job requirements.

1. Have you ever been convicted of a felony?

Yes No

Date of Conviction: _____

If yes, please explain: _____

2. Have you ever been convicted of misappropriation of funds, embezzlement, or similar for other dishonest conduct; or an offense involving the use of a weapon; for burglary, robbery, breaking and entering or theft; or physical assault or other violent crime?

Yes No

Date of Conviction: _____

If yes, please explain: _____

3. Have you ever been convicted of a misdemeanor?

Yes No

Date of Conviction: _____

If yes, please explain: _____

4. A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe your criminal conviction(s) including penalty(ies) imposed, listing the nature of your offense(s), and your rehabilitation since the conviction(s). .

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APPLICANT'S ACKNOWLEDGEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts, or incomplete answers in any application document may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document may be cause for my dismissal at any time without prior notice. I consent to and authorize **Lawrence Plastics** to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools, and personal references to give **Lawrence Plastics** (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR MY EMPLOYER(S) WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER(S) POLICY, CUSTOM BUSINESS PRACTICE, OR OTHER PROCEDURE (INCLUDING THE BASIC EMPLOYMENT POLICIES, PERSONNEL HANDBOOK, OR ANY PERSONNEL MANUALS) CONSTITUTES AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND **LAWRENCE PLASTICS**. I ALSO UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT MAY NOT CHANGE ABSENT AN INDIVIDUAL WRITTEN AGREEMENT SIGNED BY BOTH ME AND THE PRESIDENT OF THE COMPANY.

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination; submit to a background investigation; and/or take a pre-employment drug test. If I am offered employment or start work before any required test is completed, my employment is contingent on a satisfactory result on all required tests. I authorize **Lawrence Plastics** to release the results of background checks (if any) and my pre-employment drug/alcohol test (if any), any information on this application and any relevant information about me to any other companies associated with Lawrence Plastics for whom I have applied for employment, and release **Lawrence Plastics** from any and all claims related to the lawful release of this information. I further authorize the release of any background check results of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from **Lawrence Plastics** at the conclusion of this 30-day period, it is my responsibility to complete a new application if I wish to be considered for employment.

Signature

Date

Print full name - legibly

Application # _____