

APPLICATION FOR EMPLOYMENT

Volk Packaging is an equal opportunity employer dedicated to a policy of compliance with all federal and state laws regarding nondiscrimination in employment. Applicants are considered for all positions and employment decisions are made without regard to race, creed, color, religion, sex, ancestry, ethnic or national origin, age, mental or physical disability, marital status, sexual orientation, gender identity, citizenship status, veteran status or any other basis prohibited by law. No question on this application is intended to secure information to be used for unlawful purposes.

PERSONAL INFORMATION

Last Name	First	Middle
Street Address		Home Telephone
City, State, Zip		Cell Telephone
Are you at least 18 years	old? Yes No F	 Cmail

GENERAL INFORMATION

Position Desired				
Shifts Available	Days Available for Work		Ava	ailable to Start Work
Are you authorized to work in the	United States?	Yes	No	
Are you able to work overtime ho	urs, if required?	Yes	No	When?
Have you ever applied for employ	ment with us?	Yes	No	When?
Have you ever worked for this co	npany before?	Yes	No	When?
Do you know anyone currently we	orking at VPC?	Yes	No	Whom?
Who referred you to this company	y? Employment Agency	·	_ Newspaper	Ad Indeed
	Friend/Relative	Wall	k In Sc	hoolOther

EDUCATION

School	Name and Location of School	No. of Years Completed		Degree
High School			YesNo	
College			YesNo	
Graduate			YesNo	
Business/Trade, Technical	/		YesNo	

SPECIAL TRAINING

Exclude those which may disclose your race, color, religion, sexual orientation, national origin, or any other protected class.

MILITARY

Did/Do you serve in the U.S. A	Armed Forces? YesNo	Branch		
Date Entered	Date Discharged	Rank		
Describe any training received relevant to the position for which you are applying:				

EMPLOYMENT

<u>Please give accurate, complete, full-time, and part-time employment record.</u> <u>Start with your present or most</u> <u>recent employer. Please provide employment information for the past 10(ten) years. Additional space is available</u> <u>on back of application. If you have a resume, please attach.</u>

1. Company Name	Telephone ()	
Address	Employed From	To
City, State, Zip		
Name of Supervisor		
State Job Title and Describe Your Work		
Reason for Leaving		

2. Company Name	Telephone ()
Address	Employed From To
City, State, Zip	
Name of Supervisor	His/Her Position
State Job Title and Describe Your Work	
Reason for Leaving	

3. Company Name	_ Telephone ()	
Address	Employed From	To
City, State, Zip		
Name of Supervisor	_His/Her Position	
State Job Title and Describe Your Work		
Reason for Leaving		
May we contact all your current/past employers listed above	? Yes	No

If No, please list the employers you do not want us to contact and tell us the reason you do not want us to contact the employer.

CONDITIONS FOR ACCEPTANCE OF THIS APPLICATION FOR EMPLOYMENT

The information given in this application for employment must be true and correct to the best of the applicant's knowledge. Any false, misleading statements or omissions made by the applicant in this application, during an employment interview or in connection with any physical examinations will be grounds for the Company to refuse to consider the applicant for employment, revoke an offer of employment or constitute grounds for dismissal in the event the applicant is employed.

The applicant, by submitting this application for employment to the Company, authorizes it to investigate the applicant's past employment records and the accuracy and completeness of the information given on the application. Furthermore, the applicant releases from all liability and responsibility all persons, companies or organizations supplying such information.

This application for employment, the Company's employee handbook, and any other document, statement or promise either expressed or implied is not to be considered an offer for employment, a contract of employment, a guarantee of continued employment, or a guarantee of wages or benefits. Employment with the Company is not for a definite duration and can be terminated by the associate or the Company at any time, without notice, and for any reason whatsoever including, but not limited to, unsatisfactory job performance, economic conditions and violation of the Company's rules and regulations and without resorting to any disciplinary procedures that the Company may have established. Furthermore, an associate's at will employment relationship may not be altered, canceled, or converted unless such change is reduced to writing and signed by the Company's President.

APPLICANT'S STATEMENT

I have read the above **CONDITIONS FOR ACCEPTANCE OF THIS APPLICATION FOR EMPLOYMENT** and understand and agree to the terms and conditions stated herein. <u>I have been provided a copy of the Substance</u> <u>Abuse Policy.</u>

Signature of Applicant

Date

