



## Employment Application

<b>Position you are applying for:</b>						
Last Name			First Name		Middle Initial	
Mailing Address			City			
State	Zip	Cell Telephone No.	Home Telephone No.	Business Phone No.	E-Mail Address	
Are you over the age of 18?					<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you legally eligible for employment in the United States (Immigration Reform and Control Act of 1986)					<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted of a felony or any offense involving dishonesty? <small>A conviction does not necessarily eliminate you from employment consideration. Each conviction will be reviewed with respect to the offense, circumstances, seriousness, and the position for which you apply.</small>					<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>EDUCATION, TRAINING AND CERTIFICATIONS</b>						
Do you have the equivalent of a 12 <sup>th</sup> grade education?			<input type="checkbox"/> YES		<input type="checkbox"/> NO	
Names and Locations of School	Dates Attended (Mo & Yr)		Degree <b>Earned</b> (e.g. BA/BS) List <b>IF</b> completed	Diplomas/Certificates <b>Received</b>		
	From	To				
<b>Related Professional Licenses and Certifications</b> <i>(provide documentation with application)</i>						
License/Certification Issued By	Field/Trade Specialization	License or Certification Number	Issue Date	Expiration Date		
<b>EMPLOYMENT HISTORY</b>						
<p>List each position separately, even if held with the same employer. Include all unpaid and voluntary work. List your work history in chronological order, with current or most recent job first. Describe each position separately, emphasizing your professional, supervisory and committee duties. Give special attention to experience relating to the position for which you are applying. Attached additional sheets if necessary.</p> <p><b>PLEASE NOTE: A RESUME MAY BE ATTACHED, BUT WILL NOT BE ACCEPTED IN PLACE OF ANY INFORMATION ON THIS EMPLOYMENT APPLICATION. USE ADDITIONAL SHEETS IF YOU NEED MORE SPACE.</b></p>						
May we contact your present employer? YES <input type="checkbox"/> NO <input type="checkbox"/> Comment: _____						
<b>1</b>	Starting Date month / year	Ending Date month / year	Employer/Company Name and address (city and state are required)			

<input type="checkbox"/> Paid Work <input type="checkbox"/> Volunteer	Hours per Week	Name & Title of Immediate Supervisor	Telephone Number
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Title of Position Held	Reason for Leaving
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**Describe job duties & include details such as: people or project supervision, computer software used, equipment & tools used, guidelines followed, industries worked in & other details that will provide for a clear understanding of your job. (DO NOT use pre-printed job descriptions.)**


<b>2</b>	Starting Date month / year	Ending Date month / year	Employer/Company Name and address (city and state are required)
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<input type="checkbox"/> Paid Work <input type="checkbox"/> Volunteer	Hours per Week	Name & Title of Immediate Supervisor	Telephone Number
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Title of Position Held	Reason for Leaving
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**Describe job duties & include details such as: people or project supervision, computer software used, equipment & tools used, guidelines followed, industries worked in & other details that will provide for a clear understanding of your job. (DO NOT use pre-printed job descriptions.)**


<b>3</b>	Starting Date month / year	Ending Date month / year	Employer/Company Name and address (city and state are required)
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<input type="checkbox"/> Paid Work <input type="checkbox"/> Volunteer	Hours per Week	Name & Title of Immediate Supervisor	Telephone Number
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Title of Position Held	Reason for Leaving
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**Describe job duties & include details such as: people or project supervision, computer software used, equipment & tools used, guidelines followed, industries worked in & other details that will provide for a clear understanding of your job. (DO NOT use pre-printed job descriptions.)**


<b>4</b>	Starting Date month / year	Ending Date month / year	Employer/Company Name and address ( <b>city and state are required</b> )	
	<input type="checkbox"/> Paid Work <input type="checkbox"/> Volunteer	Hours per Week	Name & Title of Immediate Supervisor	Telephone Number
Title of Position Held			Reason for Leaving	
<b>Describe job duties &amp; include details such as: people or project supervision, computer software used, equipment &amp; tools used, guidelines followed, industries worked in &amp; other details that will provide for a clear understanding of your job. (DO NOT use pre-printed job descriptions.)</b>				
<b>SPECIALIZED / TECHNICAL SKILLS</b>				
<b>PROFESSIONAL REFERENCES</b>				
Name & Company		Telephone Number	Title	
Name & Company		Telephone Number	Title	
Name & Company		Telephone Number	Title	

**PLEASE READ CAREFULLY BEFORE SIGNING**

I hereby certify that the information provided in this application and/or supplemental materials is freely given, true and complete. I understand that any false, fraudulent, or misleading statements, answers, or information may be sufficient grounds for immediate rejection of my application, denial of employment, disciplinary action or dismissal from service if hired. I authorize Polyester Fibers, LLC to thoroughly investigate my work and educational history and verify data provided on this application or given during the selection process. Furthermore, I also authorize Polyester Fibers, LLC to conduct a criminal background investigation, check driving record, or contact my present or past employers if necessary. I authorize all past employers mentioned herein to release employment information requested about me. I hereby release Polyester Fibers, LLC as well as any other affiliate, director, employee, or shareholder contacted from any liability or damage that may result from obtaining the information requested. Polyester Fibers, LLC may make copies of the signed authorization form to those contacted. By electronically submitting my application materials, I agree to the conditions stated above certifying the information, and this section is enforceable as if I had signed below.

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Signature

Date