



EMERALD PACKAGING

33050 WESTERN AVENUE
PO BOX 5038
UNION CITY, CA 94587
TELEPHONE (510) 429-5700

APPLICATION FOR EMPLOYMENT

(PLEASE PRINT)

This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. Please answer all appropriate questions completely and accurately. Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or handicap or disability.

Date of Application _____

Name _____
Last First Middle

Address _____
Number Street City State Zip Code

Phone No. _____

Position(s) applied for _____

Salary desired _____ Hourly Weekly Yearly

By whom were you referred for a position with us? _____

Date available _____

Have you filed an application here before? Yes No Date: _____

Have you ever been employed here before? Yes No Date: _____

Can you, after employment, submit verification of your legal right to work in the U.S.? Yes No

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

EMPLOYMENT EXPERIENCE

List each job held. Start with your Present or Last job. Include military service assignments and volunteer activities, but do not list dates of military service and type of discharge. (Exclude groups which indicate race, color, religion, sex, national origin, or a handicap or disability.)

Employer	Phone Number	Dates	Work Performed
		From To	
Address			
Job Title			
Supervisor			
Reason for Leaving		If you are still employed, may we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Employer	Phone Number	Dates	Work Performed
		From To	
Address			
Job Title			
Supervisor			
Reason for Leaving			

Employer	Phone Number	Dates	Work Performed
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		From To	
Address			
Job Title			
Supervisor			
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

Summarize special skills and Qualifications Acquired from Employment or Other Experience: _____

EDUCATION

	Elementary	High					College/ University				Graduate/ Professional			
School Name														
Circled Years Completed	8	9	10	11	12	1	2	3	4	1	2	3	4	

Diploma/Degree _____
 Describe Course of Study _____

Describe Specialized Training, Apprenticeship, Skills and Extra Curricular Activities

Honors Received:

State any additional information you feel may be helpful to us in considering your application.

I hereby declare that my statements on this application and on my resume or document provided by me to Emerald Packaging, Inc. are true and correct to the best of my knowledge. In the event of employment, I understand that false or misleading information given on my application or in interview(s) may result in discharge. I understand that I am also required to abide by all the rules and regulations of Emerald Packaging, Inc.

I also authorize investigation of these statements. This investigation may include employment history, reasons for leaving previous employers, criminal record, and degree verifications. For positions requiring automobile transportation, a background check of my driving record may be performed as well.

I hereby release Emerald Packaging, Inc. from all liability for any damages resulting from the information obtained. As a condition of employment, I agree to comply with Emerald Packaging, Inc.'s Drug and Alcohol Policy. I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment.

I understand that all offers of employment are conditioned on successful completion of pre-employment screenings and my providing satisfactory proof of my identity and legal authority to work in the U.S.

Signature of Applicant _____ Date _____

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Interviewer _____ Date _____

Employed: Yes No Date of Employment _____

Job Title: _____ Hourly Rate/Salary _____ Dept: _____

By: _____
Name/Title Date