

# **APPLICATION FOR EMPLOYMENT**

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, sexual orientation, or any other legally protected status.

### Pre-employment drug testing is required.

Position(s) Applying For: How Did You Learn About Us?		Date:		
Advertisement	Friend	Walk-In		
Employment Agency	Relative	Other:		
Last Name:	First Name:	Middle Name:		
Address:				
City:	State:	Zip:		
Email Address:				
Phone Number:	Phone Number: Driver License Number:			
Are you at least 18 years of age? Have you ever filed an applicatio		Yes No		
If "Yes" give date: Have you ever been employed wit	hus before?	Yes No		
If "Yes" give date: Did you quit or were you fired	d? Quit F	Fired		
Reason:				
Who was your Previous Supe Are you currently employed?	Yes No			
May we contact your present em Are you legally eligible for emplo		No d States? Yes No		

Proof of citizenship or immigration status will be required upon employment. Copyright @ American Book Design

On what date are you available for work? Are you available to work Full-time or Part-time? Full-Time Part-Time
Please Explain:
Are you currently on "lay-off' status and subject to recall? Yes No
Can you travel if a job requires it? Yes No
Have you been convicted of a felony related to position applying for within the last 7 years? Yes No
Note: Conviction will not necessarily disqualify an applicant from employment.
If Yes, Please Explain:
Will you be able to perform the essential functions of the position you have applied for? Yes No
If No, what accommodation would make it possible for you to do this job?

## **EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer		Dates Employed		Hourly Rate/Salary	
Address		From	То	From	То
Telephone Supervisor			Job Title		
Work Performed					
Reason for Leaving					

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Address		From	То	From	То
Telephone	Supervisor	<u> </u>	Job Title		<u> </u>
Work Performed					
Reason for Leaving					

Employer		Dates Employed		Hourly Rate/Salary	
Address		From	То	From	То
Telephone Supervisor			Job Title		
Work Performed					
Reason for Leaving					

Describe any specialized training you have had in the field of graphic design or other fields related to desktop publishing.

# EDUCATION—Optional

Highest Grade Completed:	K-8	9-12	Some College	2 Year College	4 Year College
Last School Attended:					

# IN CASE OF EMERGENCY — Who should we contact?

Last Name:	First Name:	Middle Name:	
Address:			
City:	State:	Zip:	
Email Address:			
Phone Number:	Cell Phone Number:		

#### **APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not applications are being accepted at this time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

## **Applicant's Signature**

Written Signature:

Electronic Signature:

Date:

By clicking the email button you will be submitting your job application and an email will automatically be sent to the American Book Design, LLC. Please make sure you have all the information filled out before sending. If you experience technical difficultly you can email it directly to <u>abd@americanbookdesign.com</u>.

# Office Use Only