

# Application for Employment



Please Print

PCB® is an Equal Opportunity Employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the Human Resources Department.

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Telephone # ( ) Cellular/Other Phone # ( ) E-mail Address \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Date of Application \_\_\_\_\_

Referral Source (Please check the appropriate category and name the source)

- Advertisement \_\_\_\_\_  Job Fair \_\_\_\_\_
- Company's Website \_\_\_\_\_  Recruiter/Staffing Agency \_\_\_\_\_
- Employee \_\_\_\_\_  School \_\_\_\_\_
- Government Employment Agency \_\_\_\_\_  Walk-in \_\_\_\_\_
- Internet \_\_\_\_\_  Other \_\_\_\_\_

Type of employment desired: .....  Full Time  Part Time  
 Educational Co-Op  Seasonal  Temporary

Date available for work ..... / /

What days are you available to work?  
 Monday  Tuesday  Wednesday  Thursday  Friday  
 Saturday  Sunday

What shift are you available to work?  
 1st  2nd  3rd

Will you work overtime if required?.....  Yes  No  
If no, please explain \_\_\_\_\_

Have you submitted an application here before?.....  Yes  No  
If yes, give date(s) and position(s) \_\_\_\_\_

Have you been employed here before?.....  Yes  No  
If yes, give dates From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Are you legally eligible for employment  
in this country?.....  Yes  No  
If yes, proof is required if hired.

If you are under 18 and it is required,  
can you furnish a work permit?.....  Yes  No  
If no, please explain \_\_\_\_\_

May we contact you at work?.....  Yes  No  
If yes, work number and best time to call:  
( ) : \_\_\_\_\_ Select

Will you relocate if job requires it?.....  Yes  No

Will you travel if job requires it? .....  Yes  No  
If no, please explain \_\_\_\_\_

Driver's license number required if driving may be required in the job  
for which you are applying:  
\_\_\_\_\_ State \_\_\_\_\_

## Employment History

Starting with your most recent employer, please provide the following information.

Employer	Telephone #		
Street Address	City	State	
Starting job title / final job title	Dates Employed:	Month/Year	to Month/Year
		/	/
Immediate supervisor and title (for most recent position held)	May we contact for reference?		
Why did you leave?			
Summarize the type of work performed and job responsibilities.			
What did you like most about your position?			
What were the things you liked least about the position?			

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What were the things you liked least about the position?			

## Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If not addressed on previous page, have you ever been fired or asked to resign from a job?

Yes  No

If yes, please explain

\_\_\_\_\_

\_\_\_\_\_

## Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

\_\_\_\_\_

\_\_\_\_\_

**Computer Skills** (Check appropriate boxes. Include software titles and years of experience.)

Word Processing: \_\_\_\_\_ Years: \_\_\_\_\_  Internet: \_\_\_\_\_ Years: \_\_\_\_\_

Spreadsheet: \_\_\_\_\_ Years: \_\_\_\_\_  Other: \_\_\_\_\_ Years: \_\_\_\_\_

Presentation: \_\_\_\_\_ Years: \_\_\_\_\_  Other: \_\_\_\_\_ Years: \_\_\_\_\_

E-mail: \_\_\_\_\_ Years: \_\_\_\_\_  Other: \_\_\_\_\_ Years: \_\_\_\_\_

## Educational Background

Starting with your most recent school attended, provide the following information

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

## References

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known
			( )	
			( )	
			( )	

# Salary History



Please Print

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Starting with your most recent employer, please provide the following information.

Compensation History			
Employer:			
Starting Compensation: \$	per	Final Compensation: \$	per

Compensation History			
Employer:			
Starting Compensation: \$	per	Final Compensation: \$	per

Compensation History			
Employer:			
Starting Compensation: \$	per	Final Compensation: \$	per

Compensation History			
Employer:			
Starting Compensation: \$	per	Final Compensation: \$	per

My desired salary range or hourly rate of pay is: \$ \_\_\_\_\_ per \_\_\_\_\_

## Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude any memberships that would reveal, race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude information that would reveal, race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

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In your current or prior job, have you ever written instructions or directions to be followed by employees or customers?

Yes       No       Non Applicable

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Is there any other job-related information you want us to know about you? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_