

ALBANY  
AUBURN  
BINGHAMTON  
ELMIRA  
SCRANTON



SYRACUSE  
UTICA  
WATERTOWN  
WILLIAMSPORT

## APPLICATION FOR EMPLOYMENT

**Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.**

Please print:

Date of Application: \_\_\_\_\_

Position Applying For: \_\_\_\_\_

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

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

Telephone #: (\_\_\_\_)\_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Class: \_\_\_\_\_

If under 18 years old can you furnish a work permit? \_\_\_\_\_  
Yes No

Are you employed now? \_\_\_\_\_ May we contact your employer? \_\_\_\_\_  
Yes No Yes No

Are you on lay-off and subject to recall? \_\_\_\_\_  
Yes No

Have you been convicted of a crime, other than a traffic infraction, within the last 5 years?  
(Conviction of a crime will not necessarily disqualify an applicant from employment.)

\_\_\_\_\_  
Yes No

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



List any special skills and qualifications:

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List any other information you feel may be helpful in considering your application:

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List 3 references (Do not include relatives or past employers – include names, addresses, & telephone number):

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**I certify that the answers given are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in withdrawal of an offer of employment, or if subsequent to employment, may result in dismissal.**

**I understand that this application is not and is not intended to be a contract of employment and should I become employed, such employment may be terminated at will by either myself or my employer upon notice of one party to the other.**

**I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. You may use this authority to check references with former employers I have listed, unless otherwise indicated, as well as the personal references listed.**

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Signature

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Date

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

Date: \_\_\_\_\_

Please tell us how you learned about Erie Materials:

\_\_\_\_\_ **Newspaper Advertisement**  
Newspaper name: \_\_\_\_\_

\_\_\_\_\_ **Internet Posting/Company Website**  
Website name: \_\_\_\_\_

\_\_\_\_\_ **School Posting**  
School name: \_\_\_\_\_

\_\_\_\_\_ **Employment Agency**  
Agency name: \_\_\_\_\_

\_\_\_\_\_ **Current Employee Referral**  
Employee's name: \_\_\_\_\_

\_\_\_\_\_ **Former Employee Referral**  
Employee's name: \_\_\_\_\_

\_\_\_\_\_ **Walk-in**

\_\_\_\_\_ **Other:** \_\_\_\_\_

**THIS SECTION FOR OFFICE USE ONLY**

This application has been reviewed in full for the position the applicant is interested in.

Dept.  
Manager Initials

General/Ops  
Manager Initials

If Hired:

Date of Hire: \_\_\_\_\_

60 day trial period completion date: \_\_\_\_\_