

EMPLOYMENT APPLICATION

Pennsylvania Paper and Supply Company

PLEASE READ CAREFULLY

If you are selected for a position, you will receive a call back within 3 business days.

Otherwise applications will stay on file for 90 days. FAX TO 1-866-535-9773 or email hrresume@papaper.com

Pennsylvania Paper and Supply Company & Affiliates is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected under local, state or federal laws.

Please inform the Human Resources Department if you require reasonable accommodations to the applications or interview process.

English is the primary language of our company.

Please print in ink.

Position you are applying for?		Date of Application	
What type of hourly rate do you expect for this position?		On what date would you be available to work?	
Last Name	First Name	Middle Name	
Address	City	State	Zip Code
Telephone Number	Alternate Number (Cell)		
How Did You Hear About Us?			
<input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Employment Agency <input type="checkbox"/> Current Employee _____ <input type="checkbox"/> Other _____			Please check

Are you legally eligible to work in the United States? YES [] NO []
(Proof of eligibility will be required upon offer of employment)

Are you over the age of 18 years? YES [] NO []
(If no, you may be required to provide authorization)

Can you with or without reasonable accommodation perform the essential functions of this job? *(If you have any questions about the functions of the job, please ask the interviewer before answering this question.)* YES [] NO []

Have you ever applied to with our company or its affiliates before? *(If yes, please give date.)* YES [] NO []

Have you ever worked for our company or its affiliates? *(If yes, please give date.)* YES [] NO []

Have you ever been convicted of a felony or a crime? *(A conviction will not necessarily disqualify you, but if a conviction is related to the job at hand, employment can be denied). Falsifying information will also lead to a dismissal of an employment offer. A background check conducted through FCRA will be preformed.* YES [] NO []

If yes convicted, please explain: _____

Do you have a valid driver's license?*(For driving purposes, if a company vehicle is used)* YES [] NO []

Have you been convicted of any moving violations in the past five years? YES [] NO []
If yes, please explain: _____

Have you ever been fired or asked to resign from a job? Please list in employment section. YES [] NO []

Days and Hours Available: (If employed, I will notify my supervisor in writing, should my availability change.)

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

Please make sure you list the hours you are available for work above.

EDUCATION

	Name and Location of School	Course of Study or Major	# of Years Completed	Diploma/Degree
Elementary				
High School				
College				
Graduate				
Vocational				

Please list any academic honors, scholarships, offices held, etc. (Do not list any which reflect your race, color, religion, gender, national origin, age, disabilities or veteran status.)

Describe any specialized training, apprenticeships, licenses or skills.

Have you received any job-related training in the United States Military? YES NO

Please give dates and explanation:

REFERENCES (Please list three persons, who are not related to you or previous supervisors, who can provide professional references.)

Name	Address	Phone Number	Relationship/Occupation	Years Known

New 2010-We ask that if you can not provide work references for employment that you provide proof of past pay, including a W-2 or paystub. No employee will be hired unless verifiable references are provided and checked.

What traits do you think you have that would be an asset to our company? _____

Why do you want to work for our company? _____

Please provide any other information that you feel will help us in considering your application for employment.

EMPLOYMENT HISTORY (*Begin with current or most recent employer. Do not exclude any employment. Include any applicable temporary employment attach another sheet if necessary. Previous salaries or wages will not be used to determine compensation.*)

Company Name	Employment Dates From To	Salary Start End	Name and Title of Supervisor
Address		\$ \$	Job title or Position you held _____
Phone			

Describe your duties:

Reason for leaving and explanation:

Can we contact them for a reference?

Company Name	Employment Dates From To	Salary Start End	Name and Title of Supervisor _____
Address		\$ \$	Job Title or Position you held _____
Phone			

Describe your duties:

Reason for leaving and explanation:

Can we contact them for a reference?

Company Name	Employment Dates From To	Salary Start End	Name and Title of Supervisor _____
Address		\$ \$	Job Title or Position you held _____
Phone			

Describe your duties:

Reason for leaving and explanation:

Can we contact them for a reference?

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Pennsylvania Paper and Supply Co. & Affiliates that such employment with, is at will, for no specified duration and may be terminated by either Pennsylvania Paper and Supply Co. & Affiliates or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of Pennsylvania Paper and Supply Co. & Affiliates or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of Pennsylvania Paper and Supply Co. & Affiliates, except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of Pennsylvania Paper and Supply Co. & Affiliates.

In consideration for employment with Sovereign Commercial Services, if employed, I agree to conform to the rules, regulations, policies and procedures of Pennsylvania Paper and Supply Co. & Affiliates at all times and understand that such obedience is a condition of employment. I understand that if offered a position or considered for a position with Pennsylvania Paper and Supply Co. & Affiliates, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand those unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employments tests and checks, will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Pennsylvania Paper and Supply Co. & Affiliates and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months and retained for one year. If I wish to be considered for employment after this period I must fill out and submit a new application.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature

Date

Name and number of person completing this form if other than applicant: _____

PENNSYLVANIA PAPER AND SUPPLY CO. & AFFILIATES IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION UNDER TITLE VII OF THE CIVIL RIGHTS ACT OF 1964 WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW. A COMPLETE POSTING OF LABOR LAWS ARE ONSITE AT ALL LOCATIONS WHERE EMPLOYEES WISH TO FILL OUT APPLICATIONS IN PERSON OR REVIEW SUCH POSTINGS AT ANY TIME. WE ARE A SMOKE-FREE AND DRUG FREE WORKPLACE.

9-2010