



**PRINTCRAFT**  
P R E S S  
*Since 1927*

# EMPLOYMENT APPLICATION

208-523-4122 / 800-657-5535

670 S. Colorado Ave, Idaho Falls, ID 83402

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

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

APPLICANT INFORMATION:				
Last Name:		First Name:		Middle Name/Initial:
Address:			City:	State:      Zip:
Phone:	Cell:	Message:		

Yes	No	Are you under the age of 18? If so, can you provide required proof of eligibility to work?
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Yes	No	Do you have reliable transportation to report to work as scheduled?
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Yes	No	Have you ever filed an application with Printcraft before?      If yes, give date(s):
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Yes	No	Have you ever been employed with Printcraft before?      If yes, give date(s):
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Yes	No	Do any of your friends or relatives that work here? If yes, name, relationship, and location:
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Yes	No	Have you ever been convicted by any Federal, State or other law enforcement authorities for, or pleaded guilty or "no contest" to any violation of any Federal State, County, or municipal law, regulation or ordinance?  If yes, give date, place, charge and disposition:  _____
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DO NOT include traffic violations for which a fine of \$100 or less was imposed.  
Note: Conviction will not automatically exclude you from consideration.

**Be aware: We do background checks on all potential applicants to verify information provided is accurate.**

Yes	No	Are you currently employed?
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Yes	No	May we contact your present employer?
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Yes	No	Are you legally authorized to work in the U.S.? <b><u>Proof of citizenship or immigration status is required upon employment</u></b>
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Position Applied For:	
Date Available to Start:	
Desired Pay:	

Are you available to work: Full Time - (Please indicate 1 2 3 shift) Part Time - (Please indicate Mornings Afternoons Evenings) Temporary - (Please indicate dates available _____ to _____)		
Yes	No	Are you currently on "lay-off" status and subject to recall?
Yes	No	If the position requires you to lift, how many pounds can you lift each time during the course of the scheduled shift? _____#
Yes	No	And are you able to lift that weight on a regular/daily bases?
Yes	No	If the position requires you to stand for extended periods or even your total shift would you have any restrictions? If so, please list restrictions: _____
Yes	No	Do you have any medical/physical limitations or injuries that would prohibit you from performing the job responsibilities? If yes, please explain:

**EDUCATION**

School	Name and Address of School	Course of Study	Years Complete	Diploma/ Degree
High School				
College				
Graduate/ Professional				
Other (specify)				

**WORK 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 Address Phone #'s	Dates Employed		Work Performed
	From	To	
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			

Employer	<b>Dates Employed</b>		Work Performed
Address	<b>From</b>	<b>To</b>	
Phone #'s			
Starting/Present Job Title	<b>Hourly Rate/Salary</b>		
Supervisor	<b>Starting</b>	<b>Final</b>	
Reason for Leaving			

Employer	<b>Dates Employed</b>		Work Performed
Address	<b>From</b>	<b>To</b>	
Phone #'s			
Starting/Present Job Title	<b>Hourly Rate/Salary</b>		
Supervisor	<b>Starting</b>	<b>Final</b>	
Reason for Leaving			

Employer	<b>Dates Employed</b>		Work Performed
Address	<b>From</b>	<b>To</b>	
Phone #'s			
Starting/Present Job Title	<b>Hourly Rate/Salary</b>		
Supervisor	<b>Starting</b>	<b>Final</b>	
Reason for Leaving			

**COMMENTS: Include explanation for any gaps in employment.**

**Describe any specialized training, apprenticeship, skills and extra-curricular activities.**

**Describe any job-related training received in the United States military.**

**List professional, trade, business or civic activities and offices held.**

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

**Additional information - Other qualifications: Special job related skills or qualifications**

**SPECIALIZED SKILLS: Skills/Equipment Operated**

IT	Spreadsheet	Machinery (list)
PC/MAC	Microsoft Word	
Typing	Excel	
WPM ____	Outlook	

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

**PERSONAL/PROFESSIONAL REFERENCES - Do not include family members or past supervisors**

Name	Phone	Best time to call	Occupation

**APPLICANT'S STATEMENT**

I CERTIFY that my resume', the answers given by me to the foregoing questions and the statements made by me are full and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentation of facts called for in this application or any supplements to it, including my resume', may result in rejection of my application or discharge at any time during my employment. I voluntarily authorize my former employers, schools, and persons named by me to disclose information regarding me, whether or not such information is a part of their records. I hereby release all of these organizations and persons from any liability or damages whatsoever for unlawfully using this information.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Printcraft is on 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 acknowledge in writing by an authorized executive of Printcraft Litho-Flexo.

**I also understand that as an employee of Printcraft Press I am required to be punctual**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Interviewer Notes and Date:

Was Applicant On Time for Interview    Yes    No    If late, Reason: