



1331 Kelly Avenue
Akron, Ohio 44306
330-785-2200

Employment Application

WE ARE AN EQUAL OPPORTUNITY EMPLOYER
We consider applicants for all positions without regard to race, color, religion, sex, national origin, ancestry, age, disability, veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For Date of Application

How Did You Learn About Us?
Advertisement - Where Friend - Who Walk-In
Employment Agency - Which Relative - Who Other

Last Name First Name Middle Initial
Address City State Zip Code
Telephone Number(s) Social Security Number

On what date would you be available for work?

Wage / Salary desired

Which shift would you prefer? 1st 2nd 3rd Any

Can you work overtime? yes no

Have you ever filed an application with us before? yes no

If Yes, give date

Have you ever been employed with us before? yes no

If Yes, give dates of employment and position(s) held

May we contact your present employer? yes no

Are you legally eligible to become employed in the United States? yes no

Proof of citizenship or immigration status will be required upon employment.

Would you be willing to relocate? yes no

Are you able to travel? yes no

If yes, how often

Have you pled guilty to, pled no contest to or been convicted of a crime, within the last 10 years? yes no

An affirmative answer will not necessarily bar you from employment.

If Yes, please explain

Education

	Elementary School	High School	Undergraduate College/University	Other
School Name and Location / Address				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				

References

Give the name, address, occupation and telephone number of three references who are not related to you and are not previous employers.

1	_____	_____	_____
	(Name)	(Occupation)	(Telephone)

	(Address)		
2	_____	_____	_____
	(Name)	(Occupation)	(Telephone)

	(Address)		
3	_____	_____	_____
	(Name)	(Occupation)	(Telephone)

	(Address)		

Employment Experience

Include ALL employment over the last ten years. START WITH YOUR PRESENT OR MOST RECENT JOB. Include military assignments, if related to the position for which you are applying. You may include volunteer activities, but you are not required to include any activities, which indicate race, color, religion, sex, national origin, ancestry, disability or other legally protected status.

Present or Last Position (Title)	Dates of Employment From: To:	Last Base Rate of Pay
Company Name, Address and Telephone Number		
Type of Business:		
Briefly Describe your Duties:		
Name of Supervisor:	Reason for Leaving: (Be specific)	

Present or Last Position (Title)	Dates of Employment From: To:	Last Base Rate of Pay
Company Name, Address and Telephone Number		
Type of Business:		
Briefly Describe your Duties:		
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Company Name, Address and Telephone Number		
Type of Business:		
Briefly Describe your Duties:		
Name of Supervisor:	Reason for Leaving: (Be specific)	

(If you need additional space, please continue on a separate sheet of paper.)

Have you ever been discharged or involuntarily terminated from any employment? yes no
 If yes, please explain _____

Skills and Training

Describe special job-related skills and qualifications acquired from course work, employment or other experience. Include any computer and software training and/or experience including word-processing, spreadsheet, and data base programs.

List any special equipment or machines you can operate and describe your level of proficiency.

List any additional relevant skills you have.

Have you ever had any job-related training in the United States military?

yes no

If Yes, please describe _____

Use the space below to summarize any additional information to describe your full qualifications for the position for which you are applying.

Applicant's Certification

I certify that the information provided in this application, and any resume I submit or any interview as part of my application process, is complete and accurate to the best of my knowledge. I understand that falsification, misrepresentation or omission of facts in the application will disqualify me from further consideration or, if I am hired, will be sufficient cause for my immediate dismissal. I understand that any employment offer made to me is contingent upon reference checks.

I authorize the Landmark Plastic Corporation to obtain information about me or, to investigate, at its discretion, my past educational and employment history, personal references or other types of information provided in this application and any other information Landmark Plastic Corporation feels necessary. I understand that the release of the information disclosed to Landmark Plastic Corporation is only for the official use of Landmark Plastic Corporation with respect to my application for employment and no other purposes. I authorize my past employers, all references, and any other persons to answer all questions asked by Landmark Plastic Corporation concerning my education, abilities, and previous employment record. I release all such persons from any and all liability or damages on account of having furnished such information.

I acknowledge that, in the event of my hire, any employment relationship with Landmark Plastic Corporation is "at will," which means that I may resign at any time and Landmark Plastic Corporation may terminate my employment at any time with or without cause. I further understand this "at will" employment relationship may not be changed by any written document, by oral statement, or by conduct unless an officer of Landmark Plastic Corporation specifically documents such change in writing and writing is signed by the officer.

Further, if Landmark Plastic Corporation employs me, I understand and agree that when my employment terminates for any reason I must return all of the Company's property in my possession.

Date: _____

Applicant: _____

Background Check Information Authorization

This information is requested for criminal background check identification only and will not be used for any other purpose.

Full Name: _____

Maiden Name / any previous names used: _____

SS# _____

Date of Birth: _____

List Home addresses (for the last 7 years, list most current first – use back for more space):

Street:		City:		State:	
Zip:		County:			
From (Date):		To (Date):			

Street:		City:		State:	
Zip:		County:			
From (Date):		To (Date):			

Street:		City:		State:	
Zip:		County:			
From (Date):		To (Date):			

Street:		City:		State:	
Zip:		County:			
From (Date):		To (Date):			

Street:		City:		State:	
Zip:		County:			
From (Date):		To (Date):			

I hereby acknowledge the information provided on this form is truthful and accurate.

Signature

Date

reclaim. recycle. rethink.



nurture. grow. thrive.

Applicant: _____ Date: _____
PLEASE PRINT LAST NAME FIRST NAME

NOTICE:

Use of Consumer Report and Background Investigative Report for Employment Purposes

The Fair Credit Reporting Act permits an employer to obtain a consumer report or background investigative report for employment purposes upon receiving written authorization from the consumer. These reports may contain information bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living from public record sources or through personal interviews with neighbors, friends or associates. An employer may use the information contained in consumer's background investigative report to evaluate the consumer for employment purposes, including the hiring, promotion, reassignment or retention of the consumer as an employee.

In accordance with the Fair Credit Reporting Act, Landmark Plastic Corporation desires to obtain a copy of a consumer report or background investigative report. The information contained in these reports may be considered by Landmark Plastic Corporation in making its decision regarding your employment with the corporation or your promotion, reassignment or retention as an employee of the corporation. Please sign the authorization below indicating that you have read the notice and understand the uses for which Landmark Plastic Corporation may obtain a copy of your background investigative report, and authorizing Landmark Plastic Corporation or its designated representative to obtain a copy of your background investigative report.

CONSUMER AUTHORIZATION

I, _____, have read the "Notice of Consumer Credit Report for Employment Purposes" given to me by Landmark Plastic Corporation. I fully understand the information contained in this Notice and that Landmark Plastic Corporation may use the information contained in my consumer report or investigative report for employment purposes. I hereby authorize and request Landmark Plastic Corporation or its designated representative to obtain from any present or former employer, school, police department, financial institution or other persons having knowledge about me, any and all information in their possession regarding me in connection with an application for employment. I further agree that a photocopy of this authorization should be accepted as the original.

Applicant's Signature Date: _____