Advanced Poly-Packaging, Inc.

1331 Emmitt Road • Akron, OH 44306 • 1-800-754-4403 • fax 330-785-4010 • www.advancedpoly.com

START DATE: WAGE: HIRE BY: SHIFT: DEPT.: BENEFITS: ORIENTATION DATE: BENEFITS: BENEFITS: APPLICATION FOR EMPLOYMENT Middle Date Last Name First Middle Date Address Street Home Phone Email Address Phone Email Address Have you ever applied for employment with us? If so, when? Social Security # Email Address Position Desired Email Address Email Address	SHIFT: ORIENTATION DATE:
ORIENTATION DATE: BENEFITS: APPLICATION FOR EMPLOYMENT Last Name First Address Street Date City State Zip Code Business Phone Have you ever applied for employment with us? If so, when? Social Security # Email Address Email Address	ORIENTATION DATE:
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City State Zip Code Business Phone Have you ever applied for employment with us? If so, when? Social Security # Email Address Email Address	Last Name
Have you ever applied for employment with us? If so, when? Social Security # Email Address	Address Street
Email Address	City State
	Have you ever applied for employ
Position Desired	
	Position Desired
Are you available for full-time work? Will you work overtime if asked?	Are you available for full-time we
What shifts are you available?	What shifts are you available?
Are you of legal age to work?	
When will you be available to begin work?	
Are you legally eligible for employment in the United States?	Are you legally eligible for emplo
Do you have reliable transportation?	

EDUCATION LEVEL

School	Name/Location	Course of Study	Years Attended	Degree/Diploma
Graduate				
College				
Trade/Technical				
High School				
Elementary				
Other Special Train	ing or Skills:			

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS?

(Excluding those which may disclose race, color, religion or national origin)

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EMPLOYMENT HISTORY

Company Name	Telephone Number			
Address	Employment From:	To:		
Name of Supervisor	Weekly Pay Start:	Last:		
Job Title and Description	Reason for Leaving			
Company Name	Telephone	Telephone Number		
Address	Employment From:	То:		
Name of Supervisor	Weekly Pay Start:	Last:		
Job Title and Description	Reason for Leaving			
Company Name	Telephone	Number		
Address	Employment From:	То:		
Name of Supervisor	Weekly Pay Start:	Last:		
Job Title and Description	Reason for Leaving	Reason for Leaving		
Company Name	Telephone	Telephone Number		
Address	Employment From:	То:		
Name of Supervisor	Weekly Pay Start:	Last:		
Job Title and Description	Reason for Leaving	Reason for Leaving		
We may contact the employers listed above	e unless you indicate that you do not want u	is to contact.		
Do not contact:				
Reason:				



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MILITARY SERVICE

<u>Please answer the following questions honestly and to the best of your ability.</u>

1) We pay our employees by direct deposit (this means the money goes directly into your Bank account.) Do you agree to accept payment via direct deposit?

(Note: an account number must be provided at the time of employment.)

2) Have you ever worked for any of the following companies? If so, please list dates Employed and what position you held.

Automated Packaging Systems, Inc.:	
Sharp Manufacturing:	
Allied Automation:	
Rikart, Inc.:	
B.K. Plastics:	
Buckeye Packaging:	

3) Will you agree to sign an "Employee Secrecy and Noncompetition Agreement" which will bar you from working for the above mentioned companies?

4) Will you submit to a random drug test?	
Signature:	

Date: _____

5) We are a nonsmoking facility. Will you be willing to smoke only during designated break times outside the building?

6) Due to the cost of hiring and training new employees who work a few days then leave, our policy is to pay minimum wage for those hours.

Please sign that you will accept our policy.

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The answers to the following questions are required for a legally permissible reason including, and without limitation to, national security considerations, legitimate occupational qualifications, or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal Law also prohibits discrimination based on age and citizenship. The laws of most states also prohibit all of the above types of discrimination as well as some types of discrimination based upon ancestry, marital status or physical or mental handicap or disability.

How long at your present address?	Years	Months
What was your previous address?		
Are you a U.S. Citizen? yes Are you a Veteran? yes no		
Are you 18 years of age or older? yes	no	
Have you ever been bonded? yes If "yes", with what employers?		

Have you been convicted of a crime in the past ten years (excluding misdemeanors and summary offenses) which have not been annulled, expunged or sealed by a court? _____ yes _____ no If "yes", please explain. _____

Please state names of relatives or friends working for us.

Do you have any p	hysical conditio	n which might affect your ability to perform the job in which you are
applying	yes	no

The information provided in the Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of any offer of employment does not create a contractual obligation upon the employer to continue the employ me in the future. If you decide to engage in an investigative consumer reporting agency on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain the nature and substance of the information contained in the report.

SIGNATURE OF APPLICANT:		DATE:
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