

APPLICANT NAME _____

POSITION FOR WHICH YOU ARE APPLYING _____

DATE OF APPLICATION _____

Shift Preference

Please rate based on desirability.
1 being most desirable, 3 being the least.

_____ 1st Shift (day)
_____ 2nd Shift (afternoon/evening)
_____ 3rd Shift (overnight)



Doran & Ward is an Equal Employment Opportunity / Affirmative Action Employer and complies with all city, state, and federal employment laws when selecting employees. Doran & Ward does not discriminate on the basis of race, color, gender, national origin, religion, age, veteran (including Vietnam Era) status, or sensory, physical or mental disability in the actions of recruiting, hiring, training, and promoting people in all job classifications.

PLEASE ANSWER ALL QUESTIONS. WRITE N/A IF QUESTION DOES NOT APPLY.

PERSONAL

Name
Last First Middle Name Nickname (Known as)

Home Address Telephone ()
Street Area Code

City State Zip

Social Security Number Earnings Expected \$

Message Telephone Date Available for Employment

How did you become aware of this opening?

Why is this position of interest to you? (please explain)

Have you ever worked for Doran & Ward before? If so, when?

Most recent position(s) held at Doran & Ward

Dates

AN EQUAL OPPORTUNITY EMPLOYER

You must be 18 or older to be considered for a position which requires working around moving equipment.

Minors may be employed only in accordance with applicable state laws.

WORK/MILITARY EXPERIENCE

Please start with your present or most recent position. Please include any summer, volunteer, or part-time work which may have provided you with special training or skills that might be applicable to this position.

You may attach your resume to provide information requested below; however, please complete those items which are not included in your resume. If your complete work history includes more than three jobs, or if you wish to provide any other information you consider important, please attach additional sheets.

1. Job Title		Employed from	to
Company		Type of Business	
Business Address		Telephone ()	
Street		Area Code	
City	State	Zip	

Key Responsibilities

Compensation: Base Salary	Incentive or Bonus Pay (if any)
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Immediate Supervisor (Name & Title)

Reasons for Leaving

2. Job Title		Employed from	to
Company		Type of Business	
Business Address		Telephone ()	
Street		Area Code	
City	State	Zip	

Key Responsibilities

Compensation: Base Salary	Incentive or Bonus Pay (if any)
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Immediate Supervisor (Name & Title)

Reasons for Leaving



WORK/MILITARY EXPERIENCE - CONTINUED

3. Job Title _____ Employed from _____ to _____

Company _____ Type of Business _____

Business Address _____ Telephone (_____) _____

Street _____ Area Code _____

City _____ State _____ Zip _____

Key Responsibilities _____

Compensation: Base Salary _____ Incentive or Bonus Pay (if any) _____

Immediate Supervisor (Name & Title) _____

Reasons for Leaving _____

COMMUNITY/PROFESSIONAL ACTIVITIES

What organizations or activities have you participated in which may further qualify you for the position for which you are applying. (These might include professional, trade, or civic organizations.)

EDUCATION

TYPE OF SCHOOL	NAME/CITY/ STATE	MONTH/YEAR ATTENDED		DEGREE, IF GRADUATED	MAJOR	MINOR
		FROM	TO			

High School		<i>Leave Blank for High School</i>				
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Business/Trade _____

College/Univ. _____

Graduate School _____

Other _____

Academic Achievements
and Special Aptitudes _____



ABILITY TO PERFORM JOB

Is there any reason you would be hindered in or prevented from performing the duties of the position for which you have applied? If so, please explain.

OVERTIME

The nature of our business may require overtime or evening/shift work. Is there any reason you would not be able to work unusual hours, if required?

OFFICE SKILLS

Check the following only if applicable to the position for which you are applying:

Typing speed _____ WPM	Bookkeeping _____	Personal Computer _____
Dictaphone _____	Accounting _____	Software Proficiency (List below): _____
Central Tele. System _____	Calculator _____	_____
Telex _____	Ten Key _____	_____
Copiers _____	Word Processing Equip. _____	_____

Have you ever been convicted of a felony? Yes No
Have you ever been convicted of any type of theft or fraud or a violent crime? Yes No

If yes, on a sperate sheet, identify the crime for which you were convicted, the date of the conviction and the location of the court in which you were convicted. Please provide any details you feel are relevant. Conviction of a crime will not automatically disqualify you from consideration for employment, but will be considered as part of an evaluation of your qualifications.

ELIGIBILITY FOR EMPLOYMENT IN THE UNITED STATES

Are you a U.S. citizen, or do you have a work visa? (Circle one:) Yes No

It is Doran & Ward's policy to comply with the provisions of Federal Immigration Laws and to hire only authorized workers. If you are hired, you will be asked to provide verification of your work eligibility. Your employment will not be continued if you are unable or unwilling to provide the verification requested by Doran & Ward.

APPLICANT DRUG SCREENING CONSENT FORM

I am an applicant seeking employment with Doran & Ward Printing Company. I have been provided a copy of the Company's drug and alcohol testing policy. I have also been given a list of drugs for which pre-employment testing will be conducted.

I hereby consent to submit to drug testing consistent with the terms of the Company's policy. I also authorize the release of my test results from the testing laboratory to the Medical Review Officer (MRO) and to the designated representative of Doran & Ward.

I understand that if I refuse to provide a drug test sample of if the test results show a confirmed positive test in violation of the Company's policy, I will be unqualified for employment and my application, and/or any contingent offer of employment will be withdrawn and rejected.

Applicant Signature: _____ Date: _____

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING:

I certify that the information on this application for employment is accurate and complete, and I understand that I would be subject to dismissal if any of the information given is false or if I have failed to provide requested information.

In filling out this form, I understand that Doran & Ward may wish to investigate any of the facts or statements submitted by me. I hereby grant them permission to check any of the information except where my written statement upon this form specifically requests that no investigation be made. I certify that on the date I am available to work I will be 18 years of age or older, if the position for which I am applying requires working around moving equipment.

Additionally, I understand that nothing contained in this employment application, or in the granting of an interview, is intended to create an employment contract between Doran & Ward and me for either employment or for the providing of any benefit. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that Doran & Ward retains a similar right.

Signature _____

Name _____ Date _____

(Please Print)