



PALRAM AMERICAS

9735 Commerce Circle • Kutztown, PA 19530
Phone: (800) 999-9459 • Fax: (610) 285-9928
http://www.PalramAmericas.com

Employment Application

Palram Americas is an equal opportunity employer and does not discriminate on the basis of race, color, religion, sex, national origin, age, ancestry, disability and any other applicable legally protected status, in any employment practice, including without limitation, recruitment and hiring. All applicants are required to fully complete this application, date and sign it. Please inform a company representative immediately upon receiving this application if, as a result of a disability, you will need a reasonable accommodation to complete this application.

FIRST NAME _____ MI _____ LAST NAME _____

HOME ADDRESS _____

CITY, STATE, ZIP _____

PHONE# _____ CELL PHONE# _____

E-MAIL ADDRESS _____

BEST WAY TO REACH YOU _____ Are you eligible for employment in the US? ___ Yes ___ No

GENERAL INFORMATION

What position are you applying for? _____

How did you hear about us? Newspaper Ad Billboard Agency Other _____

Were you referred by an employee of Palram? If so, who referred you? _____

What pay range are you seeking? _____ What shifts are you willing to work? _____

EDUCATION

SCHOOL	NAME	# YEARS COMPLETED	COURSE OF STUDY	GRADUATE Y/N?	DEGREE/ DIPLOMA
High School					
College					
All Others					

MILITARY EXPERIENCE

BRANCH OF SERVICE	DATES BEGIN -END	RANK AT DISCHARGE	DUTIES/ACCOMPLISHMENTS (CONTINUE ON BACK IF NEEDED)

Convictions of any of the below will not necessarily bar employment: Have you ever been convicted of a felony, misdemeanor or any other offense other than a minor traffic violation? ___ Yes ___ No **If yes, please explain** _____

PRESENT AND PREVIOUS EMPLOYMENT HISTORY

Please begin with your most recent position and list all previous positions including any military experience, temporary/part time positions, self-employment and volunteer work.

Company Name _____ Type of business _____

Please give us a brief description of your major job duties and responsibilities:

Start Date ____/____/____ End Date ____/____/____ Job Title _____

Salary/Hourly Rate: Starting _____ Ending _____ Reason for Leaving _____

PRESENT AND PREVIOUS EMPLOYMENT HISTORY

Company Name _____ Type of business _____

Please give us a brief description of your major job duties and responsibilities:

Start Date ____/____/____ End Date ____/____/____ Job Title _____

Salary/Hourly Rate: Starting _____ Ending _____ Reason for Leaving _____

PRESENT AND PREVIOUS EMPLOYMENT HISTORY

Company Name _____ Type of business _____

Please give us a brief description of your major job duties and responsibilities:

Start Date ____/____/____ End Date ____/____/____ Job Title _____

Salary/Hourly Rate: Starting _____ Ending _____ Reason for Leaving _____

REFERENCES

Please provide at least two (2) **PROFESSIONAL** references. Provide name, title, company and the best way to contact them.

NAME	CONTACT INFORMATION

- The information set forth on my application is true and complete. I understand that if employed, any false statement, misrepresentation or material omission of information on this application may result in dismissal or may result in my failure to receive an offer of employment. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides not to hire me.
- The company is an AT-WILL employer, meaning that either the employer or the employee can end the employment relationship at any time and for any or no reason.
- I authorize you to confirm any of the information provided, obtain employment references and personal history, and obtain a consumer report, which may include a criminal history background check. Other Federal, State or local governmental agencies, former employers and former schools may also be contacted. I also authorize you to disclose any pertinent information concerning me to others. Further, I release all parties and persons from any liability that my result from furnishing such information to you as well as from the use or disclosure of such information by you.

Signature _____

Date ____/____/____