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**APPLICATION FOR  
 EMPLOYMENT**

Federal and State laws prohibit discrimination in employment because of sex, age, race, color, religion, creed, national origin, ancestry, citizenship, marital status, veteran status, physical or mental disability, sexual orientation, pregnancy, or medical condition.

NAME \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
Number Street City State Zip

JOB FOR WHICH APPLYING \_\_\_\_\_  
First Choice Second Choice Day Shift Night Shift

**EMPLOYMENT RECORD - PAST TEN YEARS**

*list most recent employer first*

Most Recent Employer

EMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_ COMPANY NAME \_\_\_\_\_  
Month/Year Month/Year

ADDRESS/PHONE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_  
Name

Duties and Responsibilities \_\_\_\_\_  
 \_\_\_\_\_

Position first held with company \_\_\_\_\_  
 Position last held with company \_\_\_\_\_  
 Starting salary \_\_\_\_\_ Salary at termination \_\_\_\_\_ Reason for leaving company: \_\_\_\_\_  
 \_\_\_\_\_

Previous Employer - #2

EMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_ COMPANY NAME \_\_\_\_\_  
Month/Year Month/Year

ADDRESS/PHONE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_  
Name

Duties and Responsibilities \_\_\_\_\_  
 \_\_\_\_\_

Position first held with company \_\_\_\_\_  
 Position last held with company \_\_\_\_\_  
 Starting salary \_\_\_\_\_ Salary at termination \_\_\_\_\_ Reason for leaving company: \_\_\_\_\_  
 \_\_\_\_\_

Previous Employer - #3

EMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_ COMPANY NAME \_\_\_\_\_  
Month/Year Month/Year

ADDRESS/PHONE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_  
Name

Duties and Responsibilities \_\_\_\_\_  
 \_\_\_\_\_

Position first held with company \_\_\_\_\_  
 Position last held with company \_\_\_\_\_  
 Starting salary \_\_\_\_\_ Salary at termination \_\_\_\_\_ Reason for leaving company: \_\_\_\_\_  
 \_\_\_\_\_

ARE YOU AT LEAST 18 YEARS OF AGE? (yes)\_\_\_\_\_ (no)\_\_\_\_\_  
(Proof of age may be required to comply with child labor laws.)

DO YOU HAVE THE LEGAL RIGHT TO WORK IN THE UNITED STATES? (yes)\_\_\_\_\_ (no)\_\_\_\_\_  
If hired, proof of right to work in the U.S. will be required.

HAVE YOU EVER BEEN CONVICTED OF A FELONY? (yes)\_\_\_\_\_ (no)\_\_\_\_\_  
If "yes", please state when, where, and disposition of case \_\_\_\_\_

(Note: Conviction record will not necessarily bar employment opportunity.)

HAVE YOU SERVED IN THE U.S. MILITARY? (yes)\_\_\_\_\_ (no)\_\_\_\_\_  
If military service provided you with job-related experience, explain: \_\_\_\_\_

WHAT DID YOU LIKE BEST ABOUT YOUR PREVIOUS JOBS? \_\_\_\_\_

WHAT ARE YOUR STRONGEST SKILLS AND ABILITIES? \_\_\_\_\_

#### EDUCATION (SCHOOLING)

HIGH SCHOOL NAME AND LOCATION: \_\_\_\_\_

COLLEGE OR UNIVERSITY NAME AND LOCATION: \_\_\_\_\_

TECHNICAL, BUSINESS OR TRADE SCHOOL NAME AND LOCATION: \_\_\_\_\_

AWARDS, DEGREES, CERTIFICATES, DIPLOMAS: \_\_\_\_\_

STATE SKILLS, APTITUDES, MACHINES, OPERATIONS, PROCESSES, EQUIPMENT relating to your work in which you are qualified: \_\_\_\_\_

#### APPLICANT'S STATEMENT

*I acknowledge and understand that if employed, despite any company disciplinary procedure, rules, standards of conduct or regulations, my employment would be "at will" which means "the relationship between employer and the employee may be terminated by either party 'unilaterally' at any time, with or without notice, for any reason, or for no reason at all". Further, I understand that the company can demote, transfer, suspend or otherwise discipline an employee in its sole and absolute discretion and that there is no promise nor representation of continued employment, or for continued or indefinite employment at a specific position or rate of pay. I further understand that only the President of the company has any authority to enter into any agreement contrary to the above "Terms of Employment" and such an agreement would have to be in writing and signed by the President.*

*I also certify that information contained in this application is accurate to the best of my knowledge. I understand that if employed, omissions of fact will be cause for termination of employment. I authorize current or prior employers, schools or persons listed in this application to give this company or its agents any and all information concerning my previous employment and I release all parties from all liability for any damage that may result for furnishing the same to this company or its agents.*

*I also understand that all offers of employment are conditioned on my providing satisfactory proof of my identity and legal authority to work in the United States as required by the Immigration Reform and Control Act.*

*The completion of this application does not constitute any guaranty of employment.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature