

Hudson Valley Plastics

85 Charles Colman Boulevard, Pawling, New York 12564
 Phone: (845) 855-1201 Fax: (845) 855-5219

EMPLOYMENT APPLICATION

First Shift: 7am-3:30pm or 7:30am-4pm, Second: 3:30pm-12:00am, Third: 11:30pm-8:00am

POSITION(S) APPLIED FOR		APPLICATION DATE	
LAST NAME	FIRST NAME	MIDDLE INITIAL	
ADDRESS	CITY	STATE	ZIP
TELEPHONE ()	SOCIAL SECURITY NUMBER	DATE OF BIRTH	
DATE AVAILABLE FOR WORK	EMPLOYMENT TYPE <input type="checkbox"/> Full-Time	<input type="checkbox"/> 1st Shift <input type="checkbox"/> 2nd Shift <input type="checkbox"/> 3rd Shift	
Were you previously employed by this organization? <input type="checkbox"/> Yes, Date(s)		Department/Position	<input type="checkbox"/> No
List any relatives or friends working for this organization:		NAME	RELATIONSHIP
WORK EXPERIENCE - LIST PRESENT AND FORMER EMPLOYERS BEGINNING WITH MOST RECENT			
FROM (MO./YR.)	TO (MO./YR.)	COMPANY NAME AND ADDRESS	TELEPHONE ()
LAST POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR'S NAME			
SUPERVISOR'S TITLE		LAST WAGES per	REASON FOR LEAVING
FROM (MO./YR.)	TO (MO./YR.)	COMPANY NAME AND ADDRESS	TELEPHONE ()
LAST POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR'S NAME			
SUPERVISOR'S TITLE		LAST WAGES per	REASON FOR LEAVING
FROM (MO./YR.)	TO (MO./YR.)	COMPANY NAME AND ADDRESS	TELEPHONE ()
LAST POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR'S NAME			
SUPERVISOR'S TITLE		LAST WAGES per	REASON FOR LEAVING
May we contact the above employers? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", indicate which one(s) you do not wish us to contact.			
Can you read English? <input type="checkbox"/> Yes <input type="checkbox"/> No Can you write English? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you served an apprenticeship? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes where?		TYPE OF TRADE	DATES
Do you have your own transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No			Continued on Other Side

SPECIAL SKILLS AND QUALIFICATIONS - MECHANICAL AND/OR TECHNICAL EXPERIENCE AND ABILITIES RELEVANT TO THE POSITION FOR WHICH YOU HAVE APPLIED.

EDUCATION

SCHOOL	LOCATION	NO. OF YEARS COMPLETED	DID YOU GRADUATE	COURSE OF STUDY	
				MAJOR	DEGREE
HIGH SCHOOL					
COLLEGE					
OTHER					

REFERENCES

NAME AND ADDRESS	RELATIONSHIP	TELEPHONE	YEARS KNOWN

MISCELLANEOUS INFORMATION

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged, or sealed by a court? (A conviction record will not necessarily be a bar to employment.) Yes No

If "Yes" please explain and describe in full detail: _____

Can you verify your legal rights to work in the U.S. by providing a birth certificate, proof of U.S. Citizenship, or by some other means? Yes No
 If you are under 18, are you able to furnish a work permit? Yes No

APPLICANT'S CERTIFICATION — Please read carefully before signing.

I certify that the answers given by me to the foregoing questions and the statements made by me in this application are correct and complete. I understand that, if I become employed, a misrepresentation or omission of fact in this application may result in my discharge from employment.

I authorize the Company, as part of its evaluation of my suitability for employment, to contact all school officials, references, and my previous supervisors to secure information concerning my skills, character and ability.

I further acknowledge and agree that no manager or representative of the Company has any authority to enter into any employment agreement. I understand and agree that, if I am employed, I will be an **at-will** employee and the Company may terminate my employment at any time and for any or no reason without prior notice.

APPLICANT'S SIGNATURE	DATE
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DO NOT WRITE BELOW - FOR COMPANY USE ONLY

INTERVIEW <input type="checkbox"/> NO <input type="checkbox"/> YES DATE _____ TIME _____ Interviewed By _____	Acceptable for Employment? <input type="checkbox"/> Yes <input type="checkbox"/> No
	DEPT. _____ CLOCK NO. _____
	OCCUPATION _____ RATE _____