

APPLICATION FOR EMPLOYMENT (cont'd.) . . .

Applicant: Please complete this page. Begin with your most recent or current employer.

Please list all computer programs you know how to use: _____

Please list in this space any other training or experience including Armed Forces; especially that related to the photographic field.
(Indicate cameras and equipment with which you are familiar.) List Photographic equipment you have used or own:

Employment History

From Mo/Yr	To Mo/Yr	Name of Firm	Address of Firm and Telephone	Name of Supervisor	Job Responsibility	Reason for Leaving
/ /	/ /	_____	_____	_____	_____	_____
/ /	/ /	_____	_____	_____	_____	_____
/ /	/ /	_____	_____	_____	_____	_____
/ /	/ /	_____	_____	_____	_____	_____
/ /	/ /	_____	_____	_____	_____	_____

Personal References

(Do not include relatives or former employers.) List three people to whom we can refer, who are sufficiently familiar with your qualifications and character to give information about you.

Name	Occupation	Current Address	Telephone
_____	_____	_____	() _____
_____	_____	_____	() _____
_____	_____	_____	() _____

I certify that the information provided by me on this application, and any accompanying resume, notes, and the like, is true, accurate, and complete. I also understand and agree that any false information, misrepresentations, or omissions made by me, whether written or oral, in connection with the application process, may disqualify me for consideration for hiring, or if not discovered until after hiring, may result in my dismissal. Further, I understand and agree that my employment is at-will, and for no definite period, and that my employment may be terminated for any reason, or no reason, at any time, without notice, regardless of the date of payment of my wages and salary. I agree, if employed, to give two weeks' notice of my intention to discontinue employment. I authorize the company to investigate all information provided and to contact any individual or entity listed, to verify the information provided, and/or to request a reference.

Signature of Applicant _____

We do not discriminate against any person because of race, color, religion, sex, national origin, marital status, height, weight, handicap, or age.

Employers note: This form is based on U.S. federal law, and there may be additional or other state requirements that apply, for which local counsel should be consulted. DO NOT WRITE IN BOX BELOW THIS LINE

Application Received by: _____	Date: _____		
Interviewed by: _____			
Hired: _____	For Department: _____	Reporting Date: _____	Salary: _____
Approved by: _____		Title: _____	

PLANT OR OFFICE POSITION

Lab Training or Experience

If applying for a photo processing plant position, please list all formal training in or experience with lab equipment, and include a list of equipment which you have either been trained to use, or with which you have had experience.

Formal training or experience:

Equipment that you can operate:

Please indicate the job functions you have had in previous lab work: *(Please ignore if you have never worked in a lab)*

(Check as many as apply)

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Plant manager | <input type="checkbox"/> Darkroom feeder | <input type="checkbox"/> Inspector | <input type="checkbox"/> Lead person |
| <input type="checkbox"/> Assistant plant manager | <input type="checkbox"/> Utility person | <input type="checkbox"/> Driver | <input type="checkbox"/> Checker/packer |
| <input type="checkbox"/> Department supervisor | <input type="checkbox"/> Maintenance mechanic | <input type="checkbox"/> Computer operator | <input type="checkbox"/> Sorter/feeder |
| <input type="checkbox"/> Hand developer | <input type="checkbox"/> Electronic technician | <input type="checkbox"/> Offset machine operator | <input type="checkbox"/> Quality checker |
| <input type="checkbox"/> Paper processor | <input type="checkbox"/> Key punch operator | <input type="checkbox"/> Copy camera operator | <input type="checkbox"/> Handler |
| <input type="checkbox"/> Printer | <input type="checkbox"/> Customer service clerk | <input type="checkbox"/> Spotter | <input type="checkbox"/> Cost clerk |
| <input type="checkbox"/> Chemical mixer | <input type="checkbox"/> Film processor | <input type="checkbox"/> Reprint marker | <input type="checkbox"/> Manual pricing clerk |
| <input type="checkbox"/> Chemical analyst | <input type="checkbox"/> Order clerk | <input type="checkbox"/> Stock/shipping clerk | <input type="checkbox"/> Prepaid order clerk |
| <input type="checkbox"/> Photographic process controller | <input type="checkbox"/> Enlarger | <input type="checkbox"/> Mail mark-up clerk | <input type="checkbox"/> Billing clerk |
| <input type="checkbox"/> Color controller | <input type="checkbox"/> Film splicer | <input type="checkbox"/> Automatic printer operator | <input type="checkbox"/> Mailing clerk |
| <input type="checkbox"/> Other: _____ | | | |

Office Training or Experience

Please indicate general office equipment you can operate: _____

Please list any formal training you have received in any of the above areas: _____

Please list all computer software programs in which you are proficient: _____

Please indicate the general office functions you have performed in past employment: *(Check as many as apply)*

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Filing/Maintaining Files | <input type="checkbox"/> Receptionist | <input type="checkbox"/> Accounting/Bookkeeping | <input type="checkbox"/> Shipping |
| <input type="checkbox"/> Personnel Record Maintenance | <input type="checkbox"/> Dictation/Shorthand | <input type="checkbox"/> Management | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> General Secretarial | <input type="checkbox"/> Invoicing | <input type="checkbox"/> Training | <input type="checkbox"/> Computer Technician |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

SALES POSITION

In this section, please expand upon your experience in photography or sales as indicated.

Photographic Training or Experience

1. Have you ever received photographic training? Yes No *(If yes, please list where and when.)*

Subject(s) covered	Name and location of facility	Date Mo./Yr.	Degree or diploma?
_____	_____	/	_____
_____	_____	/	_____
_____	_____	/	_____
_____	_____	/	_____

Indicate freelance or name and location of firm	List types of work done	Date Mo/Yr
_____	_____	/
_____	_____	/
_____	_____	/
_____	_____	/

Do you have any hobbies or interests which you believe might be of use in doing the job for which you are applying? Yes No *(If yes:*

Sales Training or Experience

Type of Sales	Name and location of most recent employer for sales area indicated	List products sold	Dates	
			From Mo/Yr	To Mo/Yr
Retail Store Selling	_____	_____	_____	_____
Door-to-Door Selling	_____	_____	_____	_____
Sales by Telephone	_____	_____	_____	_____
Other Selling Experience	_____	_____	_____	_____

Have you ever had any specialized sales training? Yes No *(If yes, please describe below.)*