



**Keystone Foam Corp.**  
An Equal Opportunity Employer

**Application for Employment**

Thank you for applying for a position with Keystone Foam, Corp. To assist in evaluating your qualifications, we ask for specific personal information on this application. Omission or falsification of information shall be considered sufficient cause for refusal of or dismissal from employment.

It is the policy of Keystone Foam Corp. to conform to federal and state laws and not to discriminate against applicants or employees based on race, color, religion, national origin, sex, age, or based on disability not limiting the applicant's ability to perform satisfactorily the job available. No question on this form is intended to secure information to be used for such discrimination. All applications remain active for twelve months from date of application.

Applicant Information			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	Zip	
Cell Phone	Home Phone:	E-mail	
Date Available	Social Security No.	Desired Salary	
Position Applied for	Type	Full Time: <input type="checkbox"/>	Part Time: <input type="checkbox"/>
Are you legally eligible to work in the U.S.? Yes No			
Have you ever worked for this company? Yes No If yes, when?			
Have you ever plead guilty or been convicted of any crime other than a summary offense? Yes No If yes, explain.			
Are you 18 years of age or older? Yes No Birthdate: _____			
Can you perform the essential functions of the position of which you are applying for? Yes No			
Are any of your relatives employed by Keystone Foam, Corp.? If so, who?			
Have you ever been discharged or asked to resign from a position? Yes No			
If presently employed, may we contact that employer for references? Yes No			
Have you served in the military? Yes No Were you asked to leave the military under less than honorable Yes No			

Education			
High School		Address	
From To	Did you graduate?	Yes No	Degree
College		Address	
From To	Did you graduate?	Yes No	Degree
Other		Address	
From To	Did you graduate?	Yes No	Degree



Employment History			
Company		From	To
Address		Phone #	
Supervisor		Responsibilities	
May we contact?	Yes	No	
Company		From	To
Address		Phone #	
Supervisor		Responsibilities	
May we contact?	Yes	No	
Company		From	To
Address		Phone #	
Supervisor		Responsibilities	
May we contact?	Yes	No	

Employment Information			
How did you hear about this position?		What is your desired schedule?	
Employment type: Full time      Part-Time		<b>Option 1:</b> Daylight - 6:00am to 3:30pm M-Th, and 6:00am - 2:30pm on Friday. 44 hours <b>Options 2:</b> Afternoon - 3:30pm to 1:00am M-Th and 2:30pm - 11:00pm on Friday. 44 hours <b>Option 3:</b> Midnight - 9:00pm - 6:30am Sunday night - Thursday morning and 9:00pm - 5:30am Thursday night into Friday morning. 44 hours.	
Are you willing to work rotating shifts?      Yes      No			
Will you work Over Time if required?      Yes      No			
Do you have transportation?      Yes      No			
_____			

### Certification And Agreement

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.

I authorize any person, organization or company listed on this application to furnish you all information concerning my previous employment, education, and qualifications for employment. I also authorize you to request and receive such information.

In consideration for my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added, or interpreted at any time, at the company's sole option and without prior notice to me.

I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself.

<b>Signature</b>	<b>Date</b>
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