

Complete this Section for Office Positions Only.				
Please check all that apply.	YES	NO	YES	NO
Personal Computer			Adobe Illustrator	
Word			Adobe Photoshop	
Excel			Adobe InDesign	
Outlook			OSX	
Goldmine			Access	
List other programs or software you have used:				

HAVE YOU EVER BEEN, OR ARE YOU CURRENTLY IN THE ARMED FORCES?			YES	NO
IF YES PLEASE EXPLAIN THE NATURE OF YOUR ASSIGNMENT:				
Specialty:	Date Entered:	Discharge Date:		

Work Experience (Please list your last three employers)			
Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code		From: To:	Start: Final:
Phone number:	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code		From: To:	Start: Final:
Phone number:	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code		From: To:	Start: Final:
Phone number:		Your last job title:	
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer?	YES	NO
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<p>Did you complete this application yourself Yes No If not, who did? _____</p> <p>Please indicate if you are able to perform the essential functions of the job for which you have applied _____ Yes _____ No. If you answered "No", please identify those job functions that you cannot perform. If a reasonable accommodation is required to enable you to perform the job properly and safely, please describe below...</p>

Please list four professional references other than relatives with three being previous employers:	
Name	Name
Position	Position
Company	Company
Address	Address
Telephone	Telephone
Name	Name
Position	Position
Company	Company
Address	Address
Telephone	Telephone

APPLICATION FORM WAIVER

As indication that you have read and understood each sentence, please write your initials in the spaces provided below.

I understand that, in connection with the routine processing of my employment application, Communication Graphics may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. Upon written request from me, Communication Graphics will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release Communication Graphics from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of Communication Graphics has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

Signature of applicant _____ Date: _____

Communication Graphics is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, veterans, age or disability. We assure you that your opportunity for employment with Communication Graphics depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.