



Superior Sign
 105 Maytown Rd.
 Elizabethtown PA. 17022
 Phone: 800.433.4253
 Fax: (717) 367.8272

Employment Application

An equal opportunity employer

Personal Information

 Last Name First Name Middle Initial Date

 Other names by which you have been known (for date verification and reference checking purposes) Social Security Number

 Home Phone Alternate Phone E-mail Address

 Permanent Address City State Zip Code

 Previous Address (If at current address less than 5 years) Driver's License Number/State

Are you a United States citizen or eligible to work in the U.S. and are able to provide the necessary documents of proof of the legal right to work upon hire? Yes No Gender (sex): Male Female

Are you under 18? Yes No If you are under 18 and still in high school, you may be required to provide a work permit upon hire.

Have you ever been convicted of a felony? Yes No _____
 If YES, give date, place, offense (previous convictions do not disqualify an applicant)

Do you have a current Driver's License? Yes No Do you have a current CDL (Commercial Driver's License)? Yes No

Served in the U.S. Military: Yes No _____
 Dates Served Branch Type of Discharge

How were you referred to Superior Sign? SuperiorSign.com website Other website (specify below) Advertisement (specify below) Self
 Employee (specify below) Agency (specify below) Radio or Television (specify below)

 Name of referral source

Have you ever applied or been employed by Superior Sign in the past? Yes No _____
 If so, when and what position? (dates)

Do you currently have any family members employed by Superior Sign? Yes No _____
 If so, who and what position?

Employment Interest

 Position Desired Salary Desired Date your Available

Would you be against the idea to use a computer or computer controlled machinery for daily jobs? Yes No

Education and Training

Indicate years attended or level completed: _____
 High School College or University Technical School or Other

Name of High School, Technical School and College	City, State	Major	Degree	Month/Year of Degree

 Additional education, vocational, professional, military or other information you feel may be helpful to us in considering your application

Employment History

Please list most recent employer first

Company Name		Street Address	
City	State	Zip Code	May we contact employer?
Starting Job Title		Final Job Title	
Supervisor's Name and Title			Phone
Reasons for leaving	Dates of employment:		
	From (mo/yr)	To (mo/yr)	
Job Duties	Starting rate of Pay (\$)	Ending rate of Pay (\$)	

Company Name		Street Address	
City	State	Zip Code	May we contact employer?
Starting Job Title		Final Job Title	
Supervisor's Name and Title			Phone
Reasons for leaving	Dates of employment:		
	From (mo/yr)	To (mo/yr)	
Job Duties	Starting rate of Pay (\$)	Ending rate of Pay (\$)	

Company Name		Street Address	
City	State	Zip Code	May we contact employer?
Starting Job Title		Final Job Title	
Supervisor's Name and Title			Phone
Reasons for leaving	Dates of employment:		
	From (mo/yr)	To (mo/yr)	
Job Duties	Starting rate of Pay (\$)	Ending rate of Pay (\$)	

References

Please list at least one present or former manager

1) Name	Email Address	Phone	Relationship
2) Name	Email Address	Phone	Relationship
3) Name	Email Address	Phone	Relationship

Read Carefully and Sign

I certify that the information contained in this application is correct to the best of my knowledge and I understand that any misstatement or omission of information is grounds for ending the hiring process or dismissal. I authorize verification of information provided on this application and authorize the references listed above to give you all pertinent information concerning my previous employment and release all parties from all liability for any damage that may result from furnishing same to Superior Sign. In consideration of my employment, I agree to conform to the rules and regulations of Superior Sign. I further agree that either I or the company may terminate my employment with or without cause and with or without prior notice, at any time. Finally, I understand that no representative of the company other than an executive officer has the authority to enter into any agreement for employment.

Signature (*Printed version*)Date (*Printed version*)