



# C L & D Graphics, Inc.

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## EMPLOYMENT APPLICATION

**We are an Equal Opportunity Employer**

Please print in ink. You must complete the entire application.

### APPLICANT INFORMATION

Name (first, middle, last) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Are there any other names under which you have worked or attended school?  Yes  No

Please list for reference checking purposes: \_\_\_\_\_

Are you legally authorized to work in the U.S.?  Yes  No *If hired you will be required to provide proof of work authorization.*

Position Applying For: \_\_\_\_\_

Have you previously applied for employment with this company?  Yes  No

Date you can start: \_\_\_\_\_ Salary Requirements: \_\_\_\_\_

Shift Preference:  SMT 4:30 p.m. – 5 a.m.  WThF 4:30 p.m. – 5 a.m.

MTW 4:30 a.m. – 5 p.m.  ThFS 4:30 a.m. – 5 p.m.  M – F

How were you referred to this company?

- Agency  Walk-in  Friend/Relative \_\_\_\_\_
- Newspaper  School  Other \_\_\_\_\_

If your position requires travel for business purposes, please indicate your willingness to travel:

- Frequently  Occasional  Not at all

### SPECIAL SKILLS

1. If relevant, please describe word processing speed, software knowledge, and office equipment experience.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. If relevant, please describe experience using machinery and equipment.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EDUCATION**

School Name	Location (City & State)	Years Attended	Major Subjects	Diploma/ Degree Received
(High School)				
(College)				
(Graduate)				
(Other)				

**TRAINING COURSE**

List any relevant training programs completed.

Course/Seminar	Organization Sponsoring	Date(s) Attended	Content

**REQUIRED LICENSE(S)**

If required to drive a motor vehicle for the job applying for, state your:

Driver's license number: \_\_\_\_\_ State issued: \_\_\_\_\_

Are you licensed with any group, association or society relating to the job for which you are applying?  Yes  No

If yes, please include the following:

License	Registration or License #	State Issued	Expiration Date

Have you ever been convicted in any court, whether civilian or military, of a violation of the law?  Yes  No

*\*Do not include minor traffic violations (e.g. non-moving violations such as parking tickets).*

If yes, provide details for each and every conviction.

Date	Charge	City & State	Court Name & Location	Final Disposition

**EMPLOYMENT HISTORY**

(Start with most recent; use separate sheet if necessary. Do not write "See Resume.")

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Name of Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Employment Dates: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact them as a reference?  Yes  No

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Name of Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Employment Dates: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Name of Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Employment Dates: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**EMPLOYMENT HISTORY**

List individuals familiar with your job qualifications. (no relatives or personal friends)

Name: _____	Day Telephone: _____
Address: _____	Evening Telephone: _____
Relationship: _____	Years Known: _____
Name: _____	Day Telephone: _____
Address: _____	Evening Telephone: _____
Relationship: _____	Years Known: _____
Name: _____	Day Telephone: _____
Address: _____	Evening Telephone: _____
Relationship: _____	Years Known: _____

**AS AN APPLICANT YOU AGREE THAT YOU UNDERSTAND THE FOLLOWING:**

1. In accordance with the Immigration Reform and Control Act of 1986, in the event you are employed, you are required to provide documents that evidence your identity and employment eligibility. These documents must be presented within three business days of hire. Failure to produce acceptable documents within prescribed time frames will result in immediate termination of employment.
2. You must meet the minimum age requirements of applicable laws.
3. In the event you are employed, you will be required to conform to the rules of the Company, and understand that your employment and compensation can be terminated, with or without cause, and with or without notice, at any time at the option of either you or the Company.
4. The Company and/or its agents may conduct investigations, including verifications of prior employment, criminal conviction history, education and driving record. By signing this application you authorize the Company and/or it's agents to make these investigations and you indicate awareness that false statements or failure to disclose information may be sufficient to disqualify you for employment or, if employed, may result in your dismissal. You authorize all of your employers to release personnel record information pertaining to you, including disciplinary records, without written notice being provided to you of their release.

Disclosure Note: Drug testing is a condition of employment; a post-contingent offer health screening will be a condition of employment for production positions.

**Signature of Applicant:** \_\_\_\_\_  
*Initialing signature line constitutes as a signature*

**Date:** \_\_\_\_\_