KDV Label

Employment Application

We are an Equal Opportunity Employer

You must complete entire applica	ation and sign where in	idicated.		L	Jale.	
Applicant Information						
Name (first, middle, last)						
Address (street, city, state, zip code)					Mobile Telephone	
Email Address:					Home Telephone	
Are you legally authorized to work authorization.)	in the U.S.? (If hired, yo No	ou will be	required	to provide pro	pof of work	
Are you at least 18 years old? If not, your employment will be sub type of work you are applying for a	nd have obtained a valid				age requirements for the	
Have you ever applied at KDV Label before? Have you ever wor					V Label before?	
☐ Yes ☐ No If yes, when:			Yes No If yes, when:			
Position Applying For	Looking for Part Full Time or Tem		Salary	Preference	Shift Preference	
If offered a position, when can you start?						
How were you referred to the company? Employee Referral Outdoor Sign Website Other						
Please describe any special skills and experience with manufacturing machines and equipment or computer proficiency, software knowledge, and office equipment experience.						
Education						
High School				Did you graduate? ☐ Yes ☐ No ☐ HSED / GED		
City & State				ı		
Technical School(s), College(s), et City & State			Deg		or Certificate Received	
Employment History (start with	most recent; use sepa	rate shee	et if nece	ssary)		
Name of Employer:			Telephone:			
Address:			Pay Rate:			
Job Title:			Employment Dates (month and year)			
Name of Immediate Supervisor:			From: To:			
Description of Duties:						
Reason for Leaving:						
If currently employed, may we contact as a reference?						

Employment History (Continued)						
Name of Employer:	Telephone:					
Address:	Pay Rate:					
Job Title:	Employment Dates (month and year)					
Name of Immediate Supervisor:	From: To:					
Description of Duties:						
Reason for Leaving:						
If currently employed, may we contact as a reference?						
Name of Employer:	Telephone:					
Address:	Pay Rate:					
Job Title:	Employment Dates (month and year)					
Name of Immediate Supervisor:	From: To:					
Description of Duties:						
Reason for Leaving:						
Name of Employer:	Telephone:					
Address:	Pay Rate:					
Job Title:	Employment Dates (month and year)					
Name of Immediate Supervisor:	From: To:					
Description of Duties:						
Reason for Leaving:						
Please Read Carefully Before Signing This Form 1. All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.						
2. I authorize the company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information about my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.						
3. I understand that upon receiving a job offer, a physical examination and drug screening may be required. (Note: If this is a job requirement, you will be notified.)						
4. Regardless of whether or not I become employed by the company, I recognize this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed, written document.						
5. It is the policy of KDV Label to provide equal employment opportunity (EEO) to all candidates and employees regardless of age, color, national origin, citizenship status, ancestry, disability, race, religion, creed, sex, sexual orientation, gender identity and/or expression, genetic information, marital status, veteran status, or any other characteristic protected by federal, state or local law.						
Signed by	Date					