

Referred by:
Application for employment

It is the policy of the company to provide equal opportunity with regard to all terms and conditions of employment. The company complies with Federal and State laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, disability, veteran status, age or any other protected characteristic.

Pro Pac Labs
3804 S. Airport Road
Ogden, UT 84405
801-621-0900

Name: _____

Phone: _____

Address: _____

City/State/Zip _____

Position applied for _____

Special training or skills (languages, machine operation, etc.) that would benefit you in the job for which you are applying for:

Would you accept full-time work? _____ Yes _____ No Part-time work? _____ Yes _____ No

On what date would you be available for work? _____

Have you ever been employed here before? _____ Yes _____ No Date: _____

Do you have a legal right to be employed in the U.S.? _____ Yes _____ No (If yes, proof is required if hired)

If you are under 18, can you provide a work permit if required? _____ Yes _____ No

Have you ever been convicted of a felony? _____ Yes _____ No.

Educational Background

College:

Name and location _____

Course of Study _____ Did you graduate? _____ Yes _____ No – Degree: _____

High School:

Name and location _____

Did you graduate? _____ Yes _____ No – GED _____ Yes _____ No

Other Vocational School, Training:

Name and location _____

Did you Graduate, have a degree or Diploma? _____ Yes _____ No

Previous Employers and Addresses

Place an X by the employer(s) you do not want us to contact. List the most recent employer first.

1. Company Name _____ Phone () _____
Contact Name _____
Address _____ Employed from _____ To _____
Position _____ Last Wage _____
Reason for Leaving _____
2. Company Name _____ Phone () _____
Contact Name _____
Address _____ Employed from _____ To _____
Position _____ Last Wage _____
Reason for Leaving _____
3. Company Name _____ Phone () _____
Contact Name _____
Address _____ Employed from _____ To _____
Position _____ Last Wage _____
Reason for Leaving _____
4. Company Name _____ Phone () _____
Contact Name _____
Address _____ Employed from _____ To _____
Position _____ Last Wage _____
Reason for Leaving _____

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED, AND IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYEMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITHOUT NOTICE, AT ANY TIME.

APPLICANT'S SIGNATURE: _____ DATE: _____