

American Eagle Paper Mills®

1600 Pennsylvania Avenue Tyrone, PA 16686

Employment Application

Your application will be considered active for a period of thirty (30) days

Please complete in ink

General Information:		
Name:		
Address:		Position Applying For:
		Home Phone:
Email Address:		Cell Phone:
Are you over the age of 18? <input type="checkbox"/> Yes or <input type="checkbox"/> No		If hired, can you provide proof that you are eligible to work in the United States? <input type="checkbox"/> Yes or <input type="checkbox"/> No
Availability:		
What type of schedule are you able to work? (Please check all that are applicable) <input type="checkbox"/> Full Time <input type="checkbox"/> Shift Work <input type="checkbox"/> Part Time <input type="checkbox"/> Overtime		
How were you referred to American Eagle Paper Mills? _____		
Have you ever applied for employment here before <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give month and year: _____		
Have you ever been employed by this organization in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No _____		
List any relatives or friends working for the Company: _____		
Education:		
School	Name & Location	
High School		Diploma or GED? <input type="checkbox"/> Yes <input type="checkbox"/> No
Trade School		Credit Hours & Major
College		Certificate/Degree Obtained Major/Minor
Other		Certificate/Degree Obtained Major/Minor
Skills:		
List all types of computers & software you have experience with:		
Licenses, Certificates and Certifications:		
List specific heavy/light equipment or power tools that you can operate:		
List any additional education or experience, hobbies, training or volunteer work that may be relevant to the position you are applying for:		
Criminal History:		
Have you ever been convicted, pled guilty or no contest to a felony or misdemeanor offense for which a sentence to an order term of imprisonment, probation or a fine was imposed under any law, rule or regulation (for example: theft, driving under the influence, drug violations)? (check) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Conviction of a crime not does not necessarily exclude you from employment.		
If you responded yes to the above question, please complete the following section:		
Nature of conviction:	Date:	Court & location:

Work Experience: (Most recent job first)

Employer	Dates of Employment
Address	Pay Rate
Telephone	Position Held
Description of Duties	Supervisor
Reason for Leaving	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

References:

Please list three references. Exclude relatives and former employers.

Name:	Telephone:
Relationship to you:	
Name:	Telephone:
Relationship to you:	
Name:	Telephone:
Relationship to you:	

APPLICANT STATEMENT: (Please Read Carefully Before Signing)

I hereby give the Company the right to make a thorough investigation into my previous employment, education, and references; and I release from liability all persons, companies, and corporations seeking or supplying such information in connection with this application.

I understand that any material misstatement of fact (e.g. failing to accurately state your employment history, reason for leaving prior employment) or omission from this application (e.g. failing to disclose a prior felony or misdemeanor conviction), will lead to the termination of my candidacy and, in the event that I am hired, will constitute sufficient cause for immediate discharge.

I also understand that nothing contained in the employment application or in the granting of an interview is intended to create an employment contract between the Company and myself. If an employment relationship is established, I understand and agree that it is at-will and that I and the Company retain the right to terminate the relationship at any time without notice or cause.

I understand that I may be offered employment conditioned upon my satisfactorily passing a drug screen, medical exam and background checks, and that the conditional offer may be withdrawn if I do not pass these requirements.

I further understand that I must comply with all rules, regulations, and policies of the Company.

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably.

I hereby acknowledge that I have read the above statement and understand the same:

Applicant Signature and Date: