

EMPLOYMENT APPLICATION

EQUAL OPPORTUNITY EMPLOYER		Please Print		
IDENTIFICA	MION			
ast Name	First Name	Middle Initial		
resent Street Addre	SS		Daytime Phone	
lity	State	Zip	Evening Phone	
ermanent Street Ad	dress (if other than above)		Other Phone	
lity	State	Zip		
POSITION I	NFORMATION			
osition Desired] Full Time 🔲 Pa	Position Re rt Time 🗌 Temporary	ference Number	Salary Desired	
eferral Source:] Advertisement	Friend Relative W	alk-In 🗌 Employment Agenc	cy Other	
EDIGIBIDIT re You Authorized] Yes] No	Y to Work in the United States?		e a Valid Driver's License (If Applicable to Position) No Dther (specify)	
ave you Been Conv	victed of a Felony? (A Yes Res	sponse Will Not Automatically	Bar Employment)	
Convictions for w Misdemeanor con dismissed; Any arrest for whi Any misdemeanor	ons that did not result in a conv hich the record has been judicia	ally ordered sealed, expunged, or as been successfully completed has been completed; or	or statutorily eradicated; or otherwise discharged and the case has been judicially	
re Any Relatives C	Currently Employed at this Com	pany? 🗌 Yes 🗌 No 🛛 If Y	Yes, Who and Relationship	

EMPLOYMENT APPLICATION EMPLOYMENT HISTORY

Present or Most recent Emplo	oyer Name	Start Date End Date	
Address	City	State Phone	
Job Title	Starting Pay	Ending Pay (Include Base/Bonus)
Description of Work Response	sibilities	Reason for Leaving	
Supervisor's Name	Supervisor's Title	May We Contact? Yes	No
Employer Name		Start Date End Date	
Address	City	State Phone	
Job Title	Starting Pay	Ending Pay (Including Base/Bonn	us)
Description of Work Response	sibilities	Reason for Leaving	
Supervisor's Name	Supervisor's Title	May We Contact? 🗌 Yes 🗌 N	lo
Employer Name		Start Date End Date	
Address	City	State Phone	
Job Title	Starting Pay	Ending Pay (Including Base/Bond	us)
Description of Work Response	sibilities	Reason for Leaving	
Supervisor's Name	Supervisor's Title	May We Contact? 🗌 Y	es 🗌 No

EMPLOYMENT APPLICATION SPECIAL TRAINING OR QUALIFICATIONS

Describe Specialized Training, Apprenticeships, Skills Which Are Related In Any Way to the Kind of Work You Want To Do

Office Machi	ines Operated		Typing Speed/ Words Per Minute
Software Ski	lls		
	Organizations, Including Organizations and those which		, Age, Religion, Sex, Sexual Orientation, or Gender Identity.)
EDUCA	TION		
High School	/ Location	Years Completed	Degree Earned? Yes No
College/Univ	versity or Professional Sch	lool	Location
Degree / Maj	or	Years Completed	Degree Earned? Yes No
Graduate Sch	nool		Location
Degree / Maj	or	Years Completed	Degree Earned? 🗌 Yes 🗌 No
Job Related (Certifications		Certification Earned? Yes No
		MENTS recy and/or Invention Agreement in Fa	vor of Any Previous Employer?
If Yes, Please	e List Employer/s		
Name	Address	Phone	Business Relationship
PROFES	SSIONAL/BUSINE	ESS/ACADEMIC REFERE	NCES
Name	Address	Phone	Business Relationship
Name	Address	Phone	Business Relationship
Name	Address	Phone	Business Relationship

EMPLOYMENT APPLICATION EQUAL OPPORTUNITY EMPLOYER

EQUAL OPPORTUNITY EMPLOYER -- It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment. We are an equal opportunity employer. This means that employment decisions are based on merit and business needs. We do not discriminate on the basis of race, color, religion, national origin, ancestry, gender, sex, gender identity, age, medical condition, sexual orientation, marital status, citizenship, pregnancy, physical or mental disability, genetic characteristics, veteran or any other protected by federal, state or local laws, or on the basis of any perception that an applicant or employee has any of these characteristics.

EMPLOYMENT APPLICATION

APPLICANT'S STATEMENT

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information contained in this application is true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview/s may result in a denial of an offer of employment or, if I am hired, immediate discharge whenever it is discovered. Under the Federal Fair Credit Reporting Act of 1970, you may request in writing the disclosure of the nature and scope of the report referred to above, if any.

I authorize the release of any and all information concerning my previous employment, education, and any pertinent information that my prior employers and schools may have, personal or otherwise, and release all parties from liability for any damage that may result from providing the information to the Company.

I understand the statements which may be contained in policies, practices, handbooks and other company material do not create any contracts, express, implied, or guarantee of employment. I understand the Company has the absolute and unconditional right to modify, amend or terminate policies, practices, benefit plans and other Company programs as it sees fit.

In consideration of my employment, I agree to conform to the rules, regulations and policies of the Company and I agree that, if I am hired, my employment will be at-will, meaning it may be terminated at any time, either by me or by the Company, with or without cause. I understand that no representative of the Company, other than the President, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing three (3) paragraphs, and that such agreement must be in writing and signed by the President.

I understand that prior to employment, or from time to time during the course of my employment, I may be required, to the extent permitted by law, to take a physical examination, including drug screen, or similar test or examination, as a condition of hiring or continued employment.

I have read and understand the forgoing (5) paragraphs and have voluntarily agreed to them.

Signature

Date

Print Name



Emerald Textiles is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, Emerald Textiles invites employees to voluntarily self-identify their race and ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

The information you provide is also **confidential**.

Full Name:

Gender: 🗆 Male

□ Female

- □ If you wish to self-identify, please complete the survey
- \Box If you choose not to self-identify, please check box

Race and Ethnicity:

Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

If you did not check "Hispanic or Latino" above, please select one of the following race/ethnic identifications/

_____ White (Not Hispanic or Latino) – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) – A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippines, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino) – All persons who identify with more than one of the above five racial/ethnic groups.

Veteran: \Box Yes \Box No As defined under one or more of the following:

served on active duty for a period of more than 180 days, and any part of which occurred between August 5, 1964 and May 7, 1975 and were discharged or released other than dishonorably; or,
was discharged or released from active duty for a service connected disability if any part of the active duty was performed between August 5, 1964 and May 7, 1975; or

who served on active duty in the U.S. military, ground, naval, or air service during a war or in a campaign or expedition for which a campaign badge has been authorized (such as The Persian Gulf, El Salvador, Grenada, Lebanon, Panama, Southwest Asia, Haiti, Somalia & Bosnia); or
one who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of discharge or release from active duty (recently separated veteran).

Signature: ____

__ Date: _____