

# Application for Employment

### PERSONAL INFORMATION

Now Attending (Check if Applicable)

☐ College/Tech School

☐ High School

| Home Phone                            | Cell Phone                                                                                                   |                     |                 |                     |                   |             |
|---------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------|-----------------|---------------------|-------------------|-------------|
|                                       | F                                                                                                            |                     |                 |                     | Middle Initia     | al          |
|                                       |                                                                                                              |                     |                 |                     |                   |             |
|                                       |                                                                                                              |                     |                 |                     |                   |             |
|                                       | mber                                                                                                         |                     |                 |                     |                   |             |
|                                       | ou are applying:                                                                                             |                     |                 |                     |                   |             |
|                                       | ☐ Full Time ☐                                                                                                | Part Time 🔲 7       | emporary        | y                   |                   |             |
| Will you work overt                   | time if required?                                                                                            | No                  |                 |                     |                   |             |
| How did you learn a                   | about this job opening:                                                                                      |                     |                 |                     |                   |             |
| ☐ Arkansas Democ                      | rat Gazette 🚨 Website 📮                                                                                      | Walk in             | ier             |                     |                   |             |
| Referred by: (Name                    | )                                                                                                            |                     | _ <b>\</b> A    | gency               |                   |             |
| Salary Requirements                   | s:                                                                                                           | Date                | Available       | to Start:           |                   |             |
| If you have relatives                 | s employed by this company, p                                                                                | lease give their na | mes:            |                     |                   |             |
| Have you worked for                   | or RiverCity before?                                                                                         | □ No                |                 |                     |                   |             |
| If yes, give last date                | worked:                                                                                                      | If                  | yes, posi       | tion:               |                   |             |
|                                       | convicted of a crime (Misden lict, or finding of guilt regardle                                              |                     |                 |                     |                   |             |
| If yes, please explain                | n.                                                                                                           |                     |                 |                     |                   |             |
| Where:                                | When:                                                                                                        | Charge              | e:              | Se                  | ntence:           |             |
| evaluated on its own                  | a criminal record will not neces:<br>merits with respect to time, circu<br>isclose such information may resu | mstances and serior | isness, in      | relation to the job | for which you are | e applying. |
| EDUCATION                             | INFORMATION                                                                                                  |                     |                 |                     |                   |             |
| Type of School                        | Name & Address of S                                                                                          |                     | ates of endance | Degree/Date         | Major             | GPA         |
| High School                           |                                                                                                              |                     | N/A             | ☐ Yes<br>☐ No       | N/A               |             |
| College/Grad/Tech<br>Business Schools |                                                                                                              |                     |                 |                     |                   |             |
|                                       |                                                                                                              |                     |                 |                     |                   |             |
|                                       |                                                                                                              |                     |                 |                     |                   |             |

☐ Grad School

% Currently Completed

## **EMPLOYMENT INFORMATION**

| Please list most recent employment first | Company Name Location & Phone # | Position/Duties/<br>Responsibilities | Salary | Immediate Supervisor | Reason for Leaving |
|------------------------------------------|---------------------------------|--------------------------------------|--------|----------------------|--------------------|
| From                                     |                                 |                                      |        |                      |                    |
| То                                       |                                 |                                      |        |                      |                    |
| From                                     |                                 |                                      |        |                      |                    |
| То                                       |                                 |                                      |        |                      |                    |
| From                                     |                                 |                                      |        |                      |                    |
| То                                       |                                 |                                      |        |                      |                    |
| From                                     |                                 |                                      |        |                      |                    |
| То                                       |                                 |                                      |        |                      |                    |

| 5 | P | F | CI | ΙΔ |   | Q | u | Δ |   | IF | C | Δ | П | 0 | N | 5 |
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| Do you have printing or bindery skills? If yes, describe                                                        |
|-----------------------------------------------------------------------------------------------------------------|
| Do you have experience working with computers? If yes, what level do you feel you are at?                       |
| What computer programs are you proficient in?                                                                   |
| Do you have any experience with Print Management systems, such as PrintSmith or Printers Plan?                  |
| Do you use social media, such as Facebook, Twitter or LinkedIn?                                                 |
| Please list any other special qualifications you have that you feel would benefit your employment at RiverCity: |

### **REFERENCES**

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

| Name | Telephone | Years Known |
|------|-----------|-------------|
|      |           |             |
|      |           |             |
|      |           |             |
|      |           |             |
|      |           |             |
|      |           |             |

<sup>&</sup>quot;RiverCity Print and Imaging is an equal opportunity employer and does not discriminate on the basis of race, religion, color, sex, age, national origin or disability."

# **ADDITIONAL INFORMATION**

List professional, trade, business or civic associations and any offices held.

| Organization                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Offices Held                                                                                                                      | Dates            |  |  |  |  |  |
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| List special accomplishments, publications, awa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | rds, etc.                                                                                                                         |                  |  |  |  |  |  |
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| List any additional information you would like                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | us to consider.                                                                                                                   |                  |  |  |  |  |  |
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| VERIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                   |                  |  |  |  |  |  |
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| CERTIFICATE/WAIVER (Read carefully before s                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                   | \ '1 11          |  |  |  |  |  |
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| the accuracy and completeness of any information p                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | rovided by me to RCPI and I hereby release RCPI and its age                                                                       | ents             |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | kind whatsoever arising from any such investigation. I hereby<br>tities, credit bureaus, investigative agencies and law enforceme | •                |  |  |  |  |  |
| vide to RCPI or its agents any and all information about me. I further agree to hold all such persons, employers (past and present),                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                  |  |  |  |  |  |
| schools, entities, credit bureaus, investigative agencies and law enforcement agencies harmless for providing to RCPI or its agents any and all truthful information about me. I expressly understand that any omissions or false or misleading statements made by me in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                   |                  |  |  |  |  |  |
| this application or in any other documents (including resume) provided by me to RCPI or in the interviewing process will be cause                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                   |                  |  |  |  |  |  |
| for rejection of my application for employment or, if employed, will be sufficient grounds for immediate dismissal. I agree to comply with, and be bound by all documents signed as part of this application and I agree to comply with all rules and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                   |                  |  |  |  |  |  |
| regulations of RCPI as a condition of continued                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | employment. I understand that if I am employed, my em                                                                             |                  |  |  |  |  |  |
| will not be for a definite duration and can be terminal I further understand that none of the company's personal statement of the company sta | ted at any time by either myself or my employer.  Sonnel policies should be constructed as a contract or as a guaran              | itee             |  |  |  |  |  |
| of continued employment. No representative of F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | RiverCity Print and Imaging, other than the President of River                                                                    | erCity Print and |  |  |  |  |  |
| Imaging, or his designee, has authority to enter into or approve any agreement for employment for any specified period of time or to approve any agreement contrary to the foregoing.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                   |                  |  |  |  |  |  |
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Date

Applicant's Signature