



**APPLICATION FOR EMPLOYMENT**

We appreciate your interest in **Syracuse Glass Company**. Syracuse Glass Company is an equal employment opportunity employer. The Company's policy is not to discriminate against any applicant or employee based on race, color, sex, sexual orientation, gender identity, religion, national origin, age (40 and over), disability, military status, genetic information or any other basis protected by applicable federal, state, or local laws. Syracuse Glass Company also prohibits harassment of applicants or employees based on any of these protected categories. It is also Syracuse Glass Company's policy to comply with all applicable federal, state and local laws respecting consideration of unemployment status in making hiring decisions.

**Note to Applicants:** Smoking is prohibited in all indoor areas of Syracuse Glass Company unless designated smoking areas have been established by a particular location in accordance with applicable state and local law.

**GENERAL INFORMATION**

Please complete all requested information. Use ink and print.

Today's Date			Position Applying For			
Name (Last)		(First)	(Middle)	Rate of Pay Desired		Date Available for Work
Street Address			Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No			
City		State	Zip	Telephone (Home)		Telephone (Work)
			( ) - ( ) -			
Have you ever used any other name(s) which is (are) necessary for us to know in order for us to verify your employment or educational record? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you available to work overtime as needed?			
If yes, please provide the other name(s):			<input type="checkbox"/> Yes <input type="checkbox"/> No			
			(You do not need to disclose scheduling restrictions related to your religion, a disability or a medical condition)			
Have you previously worked for or applied for a position with Syracuse Glass Company either as an employee or through an employment agency? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you related to or in a close personal relationship with anyone now employed at Syracuse Glass Company? (An answer of "Yes" will not automatically disqualify you from the position for which you are applying.)			
If yes, please explain when and, if employed, in what capacity:			<input type="checkbox"/> Yes <input type="checkbox"/> No			
			If yes, state name(s).			

**PERMISSION TO WORK**

Are you legally authorized to work in the United States?  Yes  No  
 Will you now or in the future require sponsorship for employment visa status (e.g., H-1B status)?  Yes  No

**EDUCATION & TRAINING**

**Highest Grade Completed:**

Grade School								High School				College			
1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4

Name of Last School Attended:

Degree/Course of Study:

License, Vocational, or Trade Training/Special Job Skills:

## WORK EXPERIENCE

Please specify your complete full-time and part-time employment history, including self-employment. You may include any verified work performed on a volunteer basis. Begin with your most recent employer. If you require additional space, please use the reverse side of this page.

	Company Name	Telephone (    )    -
	Address	Employed (Month and Year) From                      To
	Name, Title, and Phone Number of Supervisor	Reason for Leaving:
	Job Title, and Work Responsibilities	

	Company Name	Telephone (    )    -
	Address	Employed (Month and Year) From                      To
	Name, Title, and Phone Number of Supervisor	Reason for Leaving:
	Job Title and Work Responsibilities	

**All employers including your current employer may be contacted to verify the information you provide.** May we contact your current employer prior to any offer of employment? Yes  No

## PROFESSIONAL REFERENCES

Individuals not related to you. Business references preferred.

Name	Occupation	Phone	Address	Years Known and Capacity

## ADDITIONAL EMPLOYMENT INQUIRIES

**If applying for a position that will include driving:**

If hired, can you provide a valid driver's license?  Yes  No

If hired, you may be required to provide evidence of insurance or insurability.

## APPLICANT'S STATEMENT & ACKNOWLEDGMENT

**THIS APPLICATION IS NOT COMPLETE UNTIL IT IS FULLY COMPLETED, SIGNED, AND ALL STATEMENTS BELOW HAVE BEEN READ AND INITIALED.**

Initial: \_\_\_\_\_ I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.

Initial: \_\_\_\_\_ I recognize that this employment application is not an offer of employment. I agree that if I am hired by the Company, I **will be an at-will employee**, meaning that either the Company or I may end the employment relationship at any time with or without cause or notice. I understand that only the President of Syracuse Glass Company, and no manager, supervisor, or other representative of the Company, has authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the at-will employment relationship, and any such agreement must be in writing and signed by the President.

Initial: \_\_\_\_\_ I further understand and agree that, except for my at-will employment status, if hired, my wages, hours, working conditions, job assignment(s), and compensation rate(s) will be subject to change by Syracuse Glass Company.

Initial: \_\_\_\_\_ I understand that the Company may share the information contained in this application with other Company employees for employment and administrative purposes and hereby consent to such transfer.

Initial: \_\_\_\_\_ I hereby authorize, to the extent allowed by applicable federal state and local laws, Syracuse Glass Company to conduct its own investigation of my references, employment history and education and, further, authorize the references and prior employers I have listed to disclose to the Company information related to my employment history and qualifications for the position for which I am applying, without giving me prior notice of such disclosure.

Initial: \_\_\_\_\_ I understand and expressly agree that if employed by the Company, storage areas provided for me (locker, desk, etc.) are open to investigation by the Company without prior notice to me.

Initial: \_\_\_\_\_ I agree to undergo a pre-employment physical examination consistent with federal and state law.

Initial: \_\_\_\_\_ I agree to submit to legally permissible drug testing upon an offer of employment from Syracuse Glass Company and prior to starting work. I agree that any offer of employment is contingent upon my receiving a result satisfactory to the Company.

Initial: \_\_\_\_\_ I understand that the Company may not ask or require applicants to disclose past salary, wages or other compensation.

**My signature below certifies that I agree to be bound by the terms and conditions stated in this application, which contains all the understandings between the Company and me concerning the topics addressed in this Application and supersedes any prior inconsistent understandings between the Company and me on such issues.**

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

This application will only be considered for 30 days. If you have not been hired within 30 days of submitting this application and you wish to continue to be considered for employment, you must complete another application.