



## ONLINE EMPLOYMENT APPLICATION

### PERSONAL DATA

|                                                                                                                                |  |                                                                                                     |               |                                                            |
|--------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------------|
| Name (first, middle, last):                                                                                                    |  | SSN:                                                                                                |               | <input type="checkbox"/> I prefer to provide SSN in person |
| Street Address:                                                                                                                |  | City:                                                                                               | State:        | Zip:                                                       |
| Phone No.:                                                                                                                     |  | Email Address:                                                                                      |               |                                                            |
| Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                 |  | Who referred you to us?                                                                             |               |                                                            |
| Have you any relatives other than a spouse working for this company?: <input type="checkbox"/> Yes <input type="checkbox"/> No |  |                                                                                                     | If yes, who?: |                                                            |
| Are you 18 years of age or over? <input type="checkbox"/> Yes <input type="checkbox"/> No                                      |  | If "No", state age:                                                                                 |               |                                                            |
| If under 18, do you have working papers? <input type="checkbox"/> Yes <input type="checkbox"/> No                              |  | Have you ever been convicted of a felony?: <input type="checkbox"/> Yes <input type="checkbox"/> No |               |                                                            |
| If convicted of a felony, please give details including where, when and disposition of case:                                   |  |                                                                                                     |               |                                                            |
| Will you take a physical exam at company expense? <input type="checkbox"/> Yes <input type="checkbox"/> No                     |  |                                                                                                     |               |                                                            |

List any impairments, physical, mental or medical which could prevent you from performing, in a reasonable manner the job you are applying for:

### EDUCATIONAL BACKGROUND

| School  | Name & Location | Course of Study | Years Completed | Degree/Diploma |
|---------|-----------------|-----------------|-----------------|----------------|
| High    |                 |                 |                 |                |
| College |                 |                 |                 |                |
| Other   |                 |                 |                 |                |

### EMPLOYMENT HISTORY

|                                  |             |                     |        |
|----------------------------------|-------------|---------------------|--------|
| Present or most recent employer: |             | From:               | To:    |
| Address:                         |             |                     |        |
| City:                            | State:      | Zip:                | Phone: |
| Supervisor & His/Her Title:      |             | Your Title:         |        |
| Starting Rate:                   | Final Rate: | Reason for Leaving: |        |
| Employer:                        |             | From:               | To:    |
| Address:                         |             |                     |        |
| City:                            | State:      | Zip:                | Phone: |
| Supervisor & His/Her Title:      |             | Your Title:         |        |
| Starting Rate:                   | Final Rate: | Reason for Leaving: |        |

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# EMPLOYMENT HISTORY

|                             |             |                     |             |     |
|-----------------------------|-------------|---------------------|-------------|-----|
| Employer:                   |             |                     | From:       | To: |
| Address:                    |             |                     |             |     |
| City:                       | State:      | Zip:                | Phone:      |     |
| Supervisor & His/Her Title: |             |                     | Your Title: |     |
| Starting Rate:              | Final Rate: | Reason for Leaving: |             |     |
| Employer:                   |             |                     | From:       | To: |
| Address:                    |             |                     |             |     |
| City:                       | State:      | Zip:                | Phone:      |     |
| Supervisor & His/Her Title: |             |                     | Your Title: |     |
| Starting Rate:              | Final Rate: | Reason for Leaving: |             |     |
| Employer:                   |             |                     | From:       | To: |
| Address:                    |             |                     |             |     |
| City:                       | State:      | Zip:                | Phone:      |     |
| Supervisor & His/Her Title: |             |                     | Your Title: |     |
| Starting Rate:              | Final Rate: | Reason for Leaving: |             |     |

# OTHER PRIOR EMPLOYMENT INFORMATION

May we contact your present employer?:  Yes  No

List any special skills learned from employment or other experience:

# U.S. MILITARY SERVICE

Please select the location(s) you are applying for:

Today's Date \_\_\_/\_\_\_/\_\_\_

Full-Time     Part-Time

- |                                                              |                                                              |                                                         |
|--------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Andover (Andover, OH)               | <input type="checkbox"/> Frattaroli's (New Middletown, OH)   | <input type="checkbox"/> Penn Ave. (East Liverpool, OH) |
| <input type="checkbox"/> Boardman (Boardman, OH)             | <input type="checkbox"/> Frattaroli's (Struthers, OH)        | <input type="checkbox"/> Reynold's (Transfer, PA)       |
| <input type="checkbox"/> Chester (Chester, WV)               | <input type="checkbox"/> Klingemeir (Champion, OH)           | <input type="checkbox"/> Salem (Salem, OH)              |
| <input type="checkbox"/> Cochran (Youngstown, OH)            | <input type="checkbox"/> Lisbon (Lisbon, OH)                 | <input type="checkbox"/> Union Square (Youngstown, OH)  |
| <input type="checkbox"/> Cornersburg (Youngstown, OH)        | <input type="checkbox"/> New Cumberland (New Cumberland, WV) | <input type="checkbox"/> Village Plaza (Columbiana, OH) |
| <input type="checkbox"/> Cortland (Cortland, OH)             | <input type="checkbox"/> Niles (Niles, OH)                   | <input type="checkbox"/> Western Reserve (Boardman, OH) |
| <input type="checkbox"/> East Palestine (East Palestine, OH) | <input type="checkbox"/> Parkman Road (Warren, OH)           | <input type="checkbox"/> Westside (Youngstown, OH)      |
|                                                              |                                                              | <input type="checkbox"/> Windham (Windham, OH)          |

I understand that if I am employed, any false statement made on this form will be cause for dismissal. If I am employed, I further understand and agree that when my employment is terminated by retirement or otherwise, I must return all of my employer's property that is in my custody. Further, I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

**REQUIRED: Signature of Applicant** (By checking box, you agree that the above information is true and complete. You may be asked to sign a paper application at a later date.)

Prospective employees will receive consideration without discrimination because of their race, creed, color, sex, age, national origin, handicap or veteran status.