



INTERNATIONAL LABEL MFG.

EMPLOYMENT APPLICATION

1925 South 13th Street • Terre Haute, Indiana 47802 • O: 800-525-8469 • F: 812-232-3402

Download this PDF form, fill out, and save to your computer. Please email completed application to lisagonzales@internationallabelmfg.com Thank You!

Name _____ Date _____

Phone _____ Email _____

Address _____

City _____ State _____ Zip _____

Position Applying For _____ ☐ Full Time ☐ Part Time

Are you at least 18 years of age? ☐ Yes ☐ No

Are you legally eligible for employment in the U.S.A.? ☐ Yes ☐ No

Do you have a valid driver's license? ☐ Yes ☐ No

Can you travel if job position requires it? ☐ Yes ☐ No

Have you ever filled out an application with us before? ☐ Yes ☐ No

Have you ever been employed by us before? ☐ Yes ☐ No

Have you been convicted of a felony or misdemeanor within the last 10 years? ☐ Yes ☐ No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

EDUCATION

High School Diploma/GED/HiSET? ☐ Yes ☐ No

Post Secondary Degree? ☐ Associate's ☐ Bachelor's ☐ Master's

College/University _____

Field of Study _____ Year Graduated _____

Additional _____

Computer skills/programs _____

Additional training relevant to job position _____

EMPLOYMENT HISTORY

List employers, starting with the most recent position. You may attach a resume, but not in place of filling out this application. Resume is optional. Work references will be requested during interviews.

Most Recent Employer Is this your current employer?

☐ Yes

☐ No

May we contact this employer for references?

☐ Yes

☐ No

Employer _____ Phone _____

Address _____

City _____ State _____ Zip _____

Job Title _____ Hourly Rate/Salary, Starting _____ Final _____

Date Employed _____ to _____ Reason for Leaving _____

Job Description (*duties, skills, equipment used*) _____

Employer _____ Phone _____

Address _____

City _____ State _____ Zip _____

Job Title _____ Hourly Rate/Salary, Starting _____ Final _____

Date Employed _____ to _____ Reason for Leaving _____

Job Description (*duties, skills, equipment used*) _____

Employer _____ Phone _____

Address _____

City _____ State _____ Zip _____

Job Title _____ Hourly Rate/Salary, Starting _____ Final _____

Date Employed _____ to _____ Reason for Leaving _____

Job Description (*duties, skills, equipment used*) _____

CERTIFICATION & AUTHORIZATION

The above information is true and correct. I authorize International Label MFG / Midwest Printing to inquire into my education, past employment history, and references as needed to research my qualifications for this position. If employed, I will be required to provide original documents which verify my identity and right to work in the United States. International Label MFG / Midwest Printing is an equal opportunity employer, and do not discriminate on the basis of race, religion, sex, age, national origin, marital status, or disability.

I hereby acknowledge that I have read and agree to the above statements.

Name _____

Date _____