



Quality labels, Effective solutions
 6001 Brent Dr. Bldg. A
 Toledo, OH 43611
 800-882-5104
 FX: 419-697-1682
 www.bollin.com

Name and Address	
Name (First, MI, Last)	
Street Address	
City, State, and Zip Code	
Telephone Number	Email Address
Application Date	Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No

Additional Information		
Are you either a U.S. citizen or an alien authorized to work in the U.S?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever worked or attended school under another name?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please list other names used.		
Have you ever been convicted of a crime, excluding traffic violations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please explain.		
Do you have reliable transportation to get to and from work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you previously been employed by Bollin Label Systems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How did you hear about this position?		

Position and Availability						
Position Desired:			Start date available:			
Desired hours per week:	I am seeking: <input type="checkbox"/> Full time <input type="checkbox"/> Part time			Desired wage:		
What days and hours are you available to work?						
<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday	<input type="checkbox"/> Saturday	<input type="checkbox"/> Sunday
Are you able to work: <input type="checkbox"/> Weekends <input type="checkbox"/> Holidays <input type="checkbox"/> Nights <input type="checkbox"/> Overtime						

Education		
High School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Technical School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Post-Graduate Education:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Other education, training or special skills:		

Employment History

Please list all previous employment, beginning with the most recent.

Employer:		Address:	
From	To	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Employer:		Address:	
From	To	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Employer:		Address:	
From	To	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			

References	
Identify two persons who know your work, beginning with the most recent.	
Reference:	Position or Title:
Street Address	
City, State, and Zip Code	Years Known:
Telephone Number:	Email Address:
Reference:	Position or Title:
Street Address	
City, State, and Zip Code	Years Known:
Telephone Number:	Email Address:

Authorization and Acknowledgements

I affirm that the information I have provided in this application is true to the best of my knowledge, information and belief, and I have not knowingly withheld any information requested. I understand that withholding or misstating any information requested in this application is grounds for rejection of my application, and that providing false or misleading information in this application is grounds for discharge.

I authorize the company to verify my references, record of employment, education record, and any other information I have provided. Unless otherwise noted, I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers and all other persons and entities, from any and all claims, demands or liabilities arising out of or in any way related to such inquiry or disclosure.

Candidate's Signature

Date

**HIRING AND EMPLOYMENT POLICIES
OF
BOLLIN LABEL SYSTEMS**

Thank you for considering Bollin Label Systems as a potential employer. Here we have provided a checklist of important components of the hiring process. Please review these policies and check the box at the left to note that you have read and understand them.

- Bollin Label Systems is an equal employment opportunity employer which selects the individual who is the best match for a position based on job-related qualifications, without regard to race, color, ethnicity, sex (including pregnancy, childbirth, and related medical conditions), sexual orientation, gender status, age, religion, national origin, citizenship, ancestry, physical or mental disability, medical condition, marital status, genetic information or condition, military or veteran status, political belief or any other basis prohibited by federal, state, or local law.
- Like substantially all American employers, Bollin Label Systems employs its personnel "at will." This means your employment is for an indefinite period of time and it is subject to termination by you or Bollin Label Systems, with or without cause, with or without notice, and at any time. Nothing in this policy or any other policy of Bollin Label Systems shall be interpreted to be in conflict with or to eliminate or modify in any way, the at will employment status of Bollin Label System's employees. The period upon which compensation is based, e.g., hourly, monthly, annually, does not modify an employee's at will status.
- Bollin Label Systems embraces a strict policy on harassment. This means that any harassment of fellow employees, customers, vendors, or anyone associated in any way with Bollin Label Systems is strictly prohibited. All complaints of harassment will be promptly, fully and fairly investigated. Persons found guilty of harassment of any kind including, without limitation, harassment based upon race, color, creed, sex, national origin, religion, sexual orientation, gender status, age, disability, military status, marital status, ancestry, political belief, or medical condition, are subject to discipline up to and including discharge.
- Any intentional falsification, misrepresentation, or distortion made in any company document, including employment applications, is grounds for immediate discharge.
- Drug and alcohol abuse is, sadly, widespread throughout the country costing employers millions of dollars annually in medical costs, lost productivity, and the like. Bollin Label Systems therefore requires all new employees to pass an initial drug test and physical prior to employment. Bollin Label Systems may at any time ask you to submit to a random drug test. The presence of any detectable amount of any illegal drug, illegal controlled substance or alcohol in an employee's body system, while performing company business or while in a company facility, is prohibited. Therefore, if Bollin Label Systems ever has reason to suspect your use of any illegal drug, illegal controlled substance or misuse of legal ones, or your use of alcohol during work hours, Bollin Label Systems has the right to require you to submit to drug and/or alcohol testing. If any employee identifies a problem with substance abuse and is committed to seeking treatment, the employee may consult privately with a Human Resource Representative. Bollin Label Systems will make accommodation for treatment.

I hereby acknowledge that I understand the foregoing policies and principles, and have indicated my understanding by checking the appropriate boxes. I understand that compliance with the foregoing, as applicable, is a material term and condition of my employment.

Candidate's Signature: _____ Date: _____