MYERS CONTAINER SERVICE CORP.

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE	PAGES 1-5.	DATE			
Name					
Last	First	Middle		Maiden	
Present address					
	Number	Street (City State	Zip	
How long		Social S	Security No	-	_ -
Telephone <u>(</u>)					
If under 18, please list	age				
Position applied for (1)	and			
salary desired (2)					
(Be specific)					
Employment desired	FULL-TIME ONLY	PART-TIME ON	NLY FU	JLL- OR PART	T-TIME
When available for wo	ork?				
TYPE OF	NAME OF SCHOOL	LOCATION	NUMBER	OF YEARS	MAJOR & DEGREE
SCHOOL		(Complete mailing	COMP	LETED	
High School		address)			
riigii School					
College					
College					
Bus. or Trade School					
bus. of Trade School					
Professional School					

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APPLICATIO	N FOR E	MPLOYMENT				
DO YOU HAVE	E A DRIV	ER'S LICENSE?	Yes No			
What is your	means o	of transportation to	work?			
Chauffeur				·	Operator C	Commercial (CDL)
-						
<u>-</u>	-	dents during the paring violations duri	-	e vears?		any? any?
,			OFFICE (,
			40 1	Yes		
	Yes		10-key	No	Word	Yes
Typing No		WPM WPM			Processing	No
Personal	Yes	PC				
Computer	No	Мас				
Please list two	referen	ces other than relat	ives or previous	employers.		
Name				Name		
Position				Position		
Company				Company		
Address				Address		
Telephone <u>(</u>)			_Telephone ()	
llee the enace	helow to	s summarize any a	Iditional informa	ation necessary	to describe your	full qualifications for the
		hich you are applyi		ition necessary	to describe your	run quanneations for the
-						

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APPLICATION FOR EMPLOYMENT				
	MILITARY			
HAVE YOU EVER BEEN IN THE ARMED FORCES?	Yes			
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?	Date	No Yes	No	
Work Please list your work experience for you were self-employed, give firm Experienc e		ars beginni	ng with your most re	ecent job held. If
Name of employer Address City, State, Zip Code Phone number		e of last ervisor	Employment dates	Pay or salary
riione number			From	Start
			То	Final
	Your last	job title		
Reason for leaving (be specific) List the jobs you held, duties performed, skills us				
Name of employer Address		e of last		Pay or salary
City, State, Zip Code Phone number	supo	ervisor	Employment dates	011
Filone number				Start
		То		Final
Page for leaving the specific	Your Las	t Job Title		
Reason for leaving (be specific) List the jobs you held, duties performed, skills us this company.	sed or learned, ac	lvancement	s or promotions whi	le you worked at
PLEASE PRINT ALL INFORMATION				

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APPLICATION FOR EMPLOYMENT

Work Please list your work experience experience If you were self-employed, give fi					
Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary		
none number		From	Start		
		То	Final		
	Your last job title				
Reason for leaving (be specific)					
lame of employer Address City, State, Zip Code	Name of last supervisor	Employment dates	Pay or salary		
Phone number		From	Start		
		То	Final		
	Your last job title				
leason for leaving (be specific)					
ist the jobs you held, duties performed, skills this company.	used or learned, advanceme	nts or promotions w	hile you worked at		
May we contact your present employer?	es No				

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with MYERS CONTAINERS creates an actual or implied contract of employment. I understand that, if I accept employment with MYERS CONTAINERS, it will be on an at-will basis. This means that either MYERS CONTAINERS or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by MYERS CONTAINERS. I release MYERS CONTAINERS, and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing. I authorize MYERS CONTAINERS to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release MYERS CONTAINERS and its employees from all liability arising from such investigation.

Signature of applicant_	Date:	
-		

MYERS CONTAINERS is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with MYERS CONTAINERS depends solely on your qualifications.