



Application for Hourly Employment

Elmwood Park, NJ • Lewistown, PA • Putney, VT • Hickory, NC • Cordova, NC • Maiden, NC
Memphis, TN • Las Vegas, NV • Natchez, MS • Blue Ridge Molding, Conover, NC



Application for Hourly Employment

Marcal Paper Company is an equal opportunity employer and recruits, advertises, promotes, transfers, disciplines, discharges and applies all terms and conditions of employment without discrimination as to race, creed, color, national origin, sex, age, disability, marital status, affectional preference, sexual orientation, citizenship status or veteran status, except as may be required by applicable law.

PERSONAL INFORMATION *(Please Print Clearly)*

Name _____ Preferred Name _____ Date _____

Address (street, city, state, zip) _____

Phone _____ Email _____

EMPLOYMENT DESIRED

Position Applied For _____ Date Available _____ Desired Hourly Wage _____

Are you legally authorized to work in the United States without company sponsorship now and in the future? **Y** ☐ **N** ☐

If hired, you will be required to complete an I-9 form attesting to your legal authority to work in the U.S.

Have you ever applied to or worked for our company before? **Y** ☐ **N** ☐

Are you at least 18 years of age? **Y** ☐ **N** ☐

Are you willing to take a drug test? **Y** ☐

Is your spouse or any relative currently employed here? **Y** ☐ **N** ☐ If yes, please name who. _____

Have you been convicted of a felony in the past seven (7) years related to the job for which you are applying?

Y ☐ **N** ☐ If yes, please explain. _____

Where did you learn of the availability of this position? ☐ Internet Post ☐ Walk-In Referral ☐ Recall ☐ Website

☐ Agency/Recruiter (name) _____ ☐ Employee Referral (name) _____

AVAILABILITY

Days are available to work _____ Preferred work hours: _____ ☐ Part-time ☐ Full-time

Do you have a reasonable method of transportation to get to work? **Y** ☐ **N** ☐

Are you willing to work overtime as required? **Y** ☐ **N** ☐

Are you currently employed? **Y** ☐ **N** ☐ If yes, may we inquire of your present employer? **Y** ☐ **N** ☐

Do you have any commitments to another employer or organization that may affect your employment with us? **Y** ☐ **N** ☐

If yes, please explain. _____

EDUCATION Indicate the last level of education you completed.

☐ High School or GED	School Name and Address	Degree	Major/Minor
☐ College			
☐ Vocational			
☐ Other training			

Are there any other academic or community awards that you wish to tell us about? Community, events, thesis, etc.

PERSONAL OR BUSINESS REFERENCES Please provide three

Name	Company	Phone	Relationship/Title
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1.

Name	Company	Phone	Relationship/Title
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2.

Name	Company	Phone	Relationship/Title
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3.

WORK EXPERIENCE

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

Start date: _____ End: _____ Reason for Leaving: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

Start date: _____ End: _____ Reason for Leaving: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

Start date: _____ End: _____ Reason for Leaving: _____

Thank you for completing this application

Print Name: _____

Signature: _____ Date: _____



VOLUNTARY DATA SHEET

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In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is strictly voluntary. Failure to provide it will not subject you to any adverse personnel decision or action. responses will remain confidential within the human resources department. Your cooperation is appreciated. Please note that this survey is not a part of your official application for employment, it will not be used in any hiring decision. the information will be used and kept confidential in accordance with applicable laws and regulations.

A. Gender - Check one box: ☐ Male ☐ Female ☐ Nonbinary ☐ I do not want to self-identify my gender

B. Race/ethnic group: Check the box below that corresponds to the category that best identifies your race/ethnicity. important: if you check the "two or more races" box, please also check all boxes that identify your race/ethnicity. For example: if you identify yourself as asian and black, you would check 3 boxes - one for black, one for asian and one for two or more races.

- ☐ **Hispanic or latino** (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other spanish culture or origin regardless of race.)
- ☐ **White** (A person having origins in any of the original peoples of Europe, the Middle East or North Africa. Not Hispanic or Latino)
- ☐ **Black or African American** (A person having origins in any of the black racial groups of africa. Not Hispanic or Latino)
- ☐ **Native Hawaiian or other Pacific Islander** (A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands. Not Hispanic or Latino)
- ☐ **Asian** (A person having origins in any of the original peoples of the far east, southeast Asia, or the indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. Not Hispanic or Latino)
- ☐ **American Indian or Alaskan native** (A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment. Not Hispanic or Latino)
- ☐ **Two or more races** (all persons who identify with more than one of the above 5 races. Not Hispanic or Latino)
- ☐ **Prefer not to specify**

C. Can you perform the essential functions of the job without a reasonable accommodation?

Check one box: ☐ Yes ☐ No ☐ Prefer not to say If no, please explain your reasonable accommodation:

D. Are you a veteran: ☐ Yes ☐ No

Print Name: _____

Signature: _____ Date: _____