



TIMES & NEWS

PUBLISHING COMPANY

Please read carefully before completing and print all information.

PERSONAL

Last Name	First	Middle	Maiden	Date
Street Address			Box	Telephone Number
City		State	Zip	Social Security Number
Position Desired				Salary Expectations
Have you ever applied for employment with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when (Month/Year) _____				Desired Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part-Time
Have you been convicted, pled guilty or no contest to any crime in the past 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No A yes answer will not automatically disqualify you from employment. If yes, provide details				

EDUCATION

School	Name and Location of School	Course of Study	# Years Completed	Did You Graduate?	Degree/Diploma
Military Training (if applicable)					
Graduate					
College					
Business/Trade/ Technical					
High School					
Elementary					

EMERGENCY NUMBERS

Person to be notified in case of emergency.

Last

First

Telephone

Name

Address

City

Zip

Name

Address

City

Zip

Name

Address

City

Zip

SIGNATURE

Times and News Publishing Company is an at will, equal opportunity employer and does not discriminate, or tolerate discrimination, on the basis of any legally protected classification. Times and News Publishing Company reserves the right to reject the application or terminate employment in the event applicant has given false or misleading information or has withheld material information to Times and News Publishing Company.

Times and News Publishing Company reserves the right to require a post job offer, pre-employment physical and drug testing of applicants.

I understand that employment will be at will and terminable at any time for any or no reason. The information provided in this application for employment with the Times and News Publishing Company is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

Signature _____ Date _____