

# NEODESHA PLASTICS INC.

Twin Rivers Industrial Park  
 P.O Box 539 Neodesha, KS 66757  
 PH: (620) 325-3096 Fax: (620) 325-3098  
 An EEO employer



APPLICANT INFORMATION			
Last Name		First	M.I.   Date
Street Address			Apartment/Unit #
City		State	ZIP
Phone		Social Security #:	
Date Available:	Desired salary:		Referral Source:
Do you know or related to anyone working at NPI?		Position and Shift Applied for:	
Are you at least 18 years of age?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you authorized to work in the U.S.? (Proof will be required upon employment)	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when? (Name used)	
Have you ever been convicted of a crime? (May not exclude you from consideration)	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain	

EDUCATION			
High School		Address	
<u>Date</u> From:	To:	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
<u>Date</u> From:	To:	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
<u>Date</u> From:	To:	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree/Training

REFERENCES – LIST TWO PROFESSIONAL REFERENCES	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

JOB FUNCTIONS	
Do you have any conditions that would prevent you from performing the essential functions of the job applied for, including, if the job requires it, lifting up to 50 lbs?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If Yes, explain	

**PREVIOUS EMPLOYMENT – LIST YOUR MOST RECENT JOB FIRST**

Company	Phone ( )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$

Responsibilities

From	To	Reason for Leaving
------	----	--------------------

May we contact your previous employer for a reference? YES  NO

Company	Phone ( )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$

Responsibilities

From	To	Reason for Leaving
------	----	--------------------

May we contact your previous employer for a reference? YES  NO

Company	Phone ( )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$

Responsibilities

From	To	Reason for Leaving
------	----	--------------------

May we contact your previous employer for a reference? YES  NO

Company	Phone ( )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$

Responsibilities

From	To	Reason for Leaving
------	----	--------------------

May we contact your previous employer for a reference? YES  NO

**SKILLS AND QUALIFICATIONS – LIST ANY ADDITIONAL RELEVANT INFORMATION FOR OUR CONSIDERATION**


**MILITARY SERVICE**

Branch	From	To
--------	------	----

Rank at Discharge

List any specialized skills or training:

**DISCLAIMER AND SIGNATURE – PLEASE READ CAREFULLY AND SIGN**

As an Equal Opportunity Employer, Neodesha Plastics, Inc. (NPI) abides by applicable non-discrimination laws and will not unlawfully discriminate against any employee or applicant for employment because of race, color, age, sex, religion, national origin, ancestry, disability, genetic information or any other unlawful reason.

**Authorization**

I hereby authorize NPI to investigate all statements made in this application. I understand that any false statements made herein may eliminate my application from employment consideration, or if discovered after hire, may result in my discharge from employment.

If hired I will conform to the policies, rules and regulations of NPI. I agree to submit to a complete physical examination (50 lb strength test if required for the position) including drug testing and or background check and understand that all job offers are conditional until I pass all required screening. I understand that certain positions may require me to sign and abide by an agreement of confidentiality.

**Acknowledgment of at will Employment**

**I acknowledge that both my employment and my compensation can be terminated and/or changed at will, with or without prior notice and at the sole option of NPI, and that I can resign at any time, with or without prior notice and at my sole option. I understand that no representative of NPI has any authority to enter into any agreement hiring me for a specified period of time, or to make any agreement contrary to the acknowledgement other than the President of the Company.**

Signature

Date