



APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer - It is the policy of this company to provide equal opportunity employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, pregnancy, medical condition, sexual orientation, veteran status, or any other status protected under state and federal law.

Position Desired: _____

Rate of Pay Expected: _____

Name: _____
(Print) _____ Last _____ First _____ MI _____

Please list any name you have ever gone by other than the one listed: _____

Present Address: _____
Street # _____ Street _____ City _____ State _____ Zip Code _____

How long have you lived at this address? _____
Years _____ Months _____

Email Address: _____

Telephone Number: _____

Have you ever worked for American Glass / AGF Glass in the past? Yes No

If yes, please provide dates, position, and reason for leaving: _____

How did you find out about this position? _____

Please list names of any relatives employed by American Glass / AGF Glass: _____

On what date would you be available for work? _____

Are you legally permitted to work in the United States? Yes No
Note: Proof of eligibility will be required within three working days of employment.

If hired, can you furnish proof that you are over 18 years of age? Yes No

Are you capable of performing the essential functions required for the position for which you are applying with or without accommodation? Yes No

Can you meet the travel requirements of the position? Yes No

Have you ever pled guilty or "no contest" to, or been convicted of, a felony? Yes No
If yes, please give the date(s) and details: _____

Note: Answering "Yes" to the question above does not constitute an automatic bar from employment. Factors such as age, time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. (Do not include minor traffic infractions, and convictions for which the record has been sealed or expunged, any conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, referrals to and participation in any pre-trial or post-trial diversion programs.



RECORD OF PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. [Add additional page if necessary]

Present or Last Employer Name:	Employed From: /	Rate of Pay:	Position Title & Duties:
Address:			
City, State, Zip Code:	(mo/yr) To: /	Start	Reason for Leaving:
Telephone:			
Supervisor Name:	(mo/yr)	Final	

May we contact this employer? Yes No

Previous Employer Name:	Employed From: /	Rate of Pay:	Position Title & Duties:
Address:			
City, State, Zip Code:	(mo/yr) To: /	Start	Reason for Leaving:
Telephone:			
Supervisor Name:	(mo/yr)	Final	

May we contact this employer? Yes No

Previous Employer Name:	Employed From: /	Rate of Pay:	Position Title & Duties:
Address:			
City, State, Zip Code:	(mo/yr) To: /	Start	Reason for Leaving:
Telephone:			
Supervisor Name:	(mo/yr)	Final	

May we contact this employer? Yes No



RECORD OF PREVIOUS EMPLOYMENT

(Continued)

Previous Employer Name:	Employed From:	Rate of Pay:	Position Title & Duties:
Address:			
City, State, Zip Code:	(month / year)	Start	Reason for Leaving:
Telephone:	To:		
Supervisor Name:	/	(month / year)	

May we contact this employer? Yes No

Have you been terminated or asked to resign from any job? Yes No

If Yes, please provide circumstances: _____

Please explain fully any gaps in your employment history: _____

Please indicate any actual experience, special training and qualifications you possess which you feel are relevant to the position for which you are applying: _____

EDUCATION

School Name	Years Completed (circle)	Did You Graduate?	Diploma/ Degree	Describe Course of Study or Major	Describe Specialized Training, Experience and Skills
High School:	9 10 11 12 GED	Y / N			
College/University:	1 2 3 4	Y / N			
Trade/Correspondence:		Y / N			
Other:					



REFERENCES

Please two (2) Professional and one (1) Personal Reference

Name	Occupation	Telephone Number	# Years Known

APPLICANT'S STATEMENT & AGREEMENT

In the event of my employment to a position with AGF Glass, I will comply with all rules and regulations of AGF Glass. I understand that the company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment and at any time during my employment, to the extent permitted by law. I also understand that any offer of employment may be contingent upon the passing of a physical examination, and background screenings. I consent to the disclosure of the results and related tests to AGF Glass. I also understand that I may be required to take other tests such as personality and honesty tests, prior to employment and during my employment. I understand that should I decline to sign this consent or decline to take any of the above tests, my application for employment may be rejected or my employment may be terminated.

I understand that AGF Glass may investigate my driving record and my criminal record and that an investigative consumer report may be prepared. I understand that I have the right to make a written inquiry within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I further understand that AGF Glass may contact my previous employers, if I have indicated permission within this application, and I authorize the employers to disclose to AGF Glass all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees and representatives, as well as other individuals who release information to AGF Glass, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I authorize the persons named herein as personal references to provide AGF Glass with any pertinent information they may have regarding me.

I hereby state that all the information that I provided on this application or any other documents filled out in connection with my employment, and in any interview is true and correct. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed and any such information is later found to be false or incomplete in any respect, I may be dismissed. I understand if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.

If hired, I agree as follows: My employment and compensation is terminable at-will, is for no definite period, and my employment and compensation may be terminated by either AGF Glass or me at any time and for any reason whatsoever, with or without good cause.

This is the entire agreement between AGF Glass and the Employee, and this agreement supersedes any and all prior agreements. It is further agreed and understood that any agreement contrary to the foregoing must be entered into, in writing, by myself and the Owner of AGF Glass. No supervisor or representative of AGF Glass, other than the Owner, has any authority to enter into any agreement contrary to the foregoing. Oral representations made before or after you are hired do not alter this Agreement.

If any term or provision, or portion of this Agreement is declared void or unenforceable it shall be severed, and the remainder of this Agreement shall be enforceable. If you have any questions regarding this statement, please ask a company representative before signing. I hereby acknowledge that I have read the above statements and understand the same. My signature below attests that I have read, understood, and agree to be legally bound to all of the above terms.

This application for employment is valid for the next 90 days. I understand that if I wish to be considered for employment after this period of time, I must apply again.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT & AGREEMENT

Signature of Applicant

Date

Print Name: _____

