MORCON TISSUE

Employment Application



APPLICANT INFORMATION								
Last Name	First		N	1.I.		Today's Date		
Street Address			'		Apa	artment#		
City	State				ZIP	1	1	
Phone	E-mail Addr	ess						
Date Available	ı	Des	sired Shift					
Position Applied for	How did you	ı hear abo	ut Morcon?					
Are you legally authorized to work in the United States?	YES 🗆	NO 🗆						
Have you ever worked for this company?	YES	NO 🗆	If so, wh	If so, when?				
Have you ever been convicted of a felony?	YES	NO 🗆	If yes, ex	If yes, explain				
EDUCATION								
High School		Address						
Did you graduate? YES NO Degree			'					
College		Address						
Did you graduate? YES NO Degree								
Other		Address						
Did you graduate? YES NO Degree								
REFERENCES								
Please list three professional references.								
Full Name		Relations	ship					
Company				Phone				
Address								
Full Name		Relations	ship					
Company			Phone					
Address								
Full Name		Relations	ship					
Company		Phone						
Address								
ESSENTIAL FUNCTIONS								
Can you perform the essential functions of the job for which you are being considered with or without reasonable accommodation?								
Please describe any accommodation required.								

PREVIOUS EMI	PLOYMENT						
Company			Phone				
Address			Supervisor				
Job Title							
Responsibilities							
From	То	Reason for Leaving					
May we contact your previous supervisor for a reference? YES NO							
Company			Phone				
Address			Supervisor				
Job Title							
Responsibilities							
From	То	Reason for Leaving					
May we contact you	ur previous superv	sor for a reference? YES	NO				
Company			Phone				
Address			Supervisor				
Job Title							
Responsibilities							
From	То	Reason for Leaving					
May we contact you	ur previous superv	sor for a reference? YES	NO				

MILITARY SERVICE					
Branch	From To				
Rank at Discharge	Type of Discharge				
If other than honorable, explain					

DISCLAIMER AND SIGNATURE

MORCON, INC. CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, MARITAL OR VETERAN STATUS, SEXUAL ORIENTATION, OR ANY OTHER LEGALLY PROTECTED STATUS.

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN, CRIMINAL RECORDS AND THE REFERENCES LISTED ABOVE, TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I UNDERSTAND THAT AS A CONDITION OF EMPLOYMENT, THE COMPANY WILL REQUIRE PRE-EMPLOYMENT DRUG TESTING OF ALL SUCCESSFUL APPLICANTS, CONSISTENT WITH THE COMPANY'S DRUG TESTING PROGRAM. I HEREBY CONSENT TO UNDERGO SUCH TEST AND UNDERSTAND THAT IF I FAIL TO PASS SUCH PRE-EMPLOYMENT DRUG TEST, I WILL NOT BE CONSIDERED ELIGIBLE FOR EMPLOYMENT WITH THE COMPANY. I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS AT-WILL AND EITHER I OR MORCON, INC. MAY DISCONTINUE OUR EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY REASON WITHOUT PRIOR NOTICE. WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

Signature Date