



1010 10th Street NE
 Independence, IA 50644
 319.334.3344
 jobs@qcplastics.com
 www.qcplastics.com

Date: _____

Application for Employment

QC|Plastics is an equal employment opportunity employer.

Full Name: _____

Address: _____

Phone Number: _____

Can you receive & respond to text messages at this phone number? Yes No

Email: _____

What position are you applying for? _____

Type of employment desired: Full-time Part-time Temporary

Date available for work: _____

Hours available to work:

Monday	_____	to	_____
Tuesday	_____	to	_____
Wednesday	_____	to	_____
Thursday	_____	to	_____
Friday	_____	to	_____
Saturday	_____	to	_____
Sunday	_____	to	_____

Are you willing to work overtime hours when needed? Yes No

Desired hourly wage: _____

If hired, can you provide documentation that you are authorized to work in the United States? Yes No

If hired, can you provide documentation that you are 18 years or older? Yes No

Are you a veteran? Yes No

Have you ever been convicted of a felony? Yes No (You may provide additional details below if you wish.)

Have you previously worked for QC|Plastics? Yes No

Do you have a valid driver's license? Yes No

Do you have a reliable means to get to work? Yes No

Are you able to stand for a 10 hour shift? Yes No

Are you able to lift 25 pounds repeatedly during a 10 hour shift? Yes No

Are you able to perform basic math calculations: addition, subtraction, multiplication, division? Yes No

Do you have the ability and knowledge to use basic shop tools? Yes No

Are you willing to submit to background check if selected for employment? Yes No

Are you willing to submit to drug testing if selected for employment? Yes No

Do you have any qualifications or special skills that make you a great candidate for this position?

EDUCATION	Name & Location	Years Attended	Course of Study	Degree Obtained
High School				
College/Trade School				

WORK EXPERIENCE - Please list your work experience for at least the past five years, beginning with your most recent job held. Attach additional sheets if necessary.

May we contact your present employer? Yes No

May we contact all former employers listed in this application? Yes No

Company Name: _____

Location: _____

Last Position: _____

Supervisor: _____

Starting Date: _____

Ending Date: _____

Starting Wage: _____

Ending Wage: _____

Relevant Duties/Skills: _____

Reason for Leaving: _____

Company Name: _____ Location: _____
Last Position: _____ Supervisor: _____
Starting Date: _____ Ending Date: _____
Starting Wage: _____ Ending Wage: _____
Relevant Duties/Skills : _____
Reason for Leaving: _____

Company Name: _____ Location: _____
Last Position: _____ Supervisor: _____
Starting Date: _____ Ending Date: _____
Starting Wage: _____ Ending Wage: _____
Relevant Duties/Skills : _____
Reason for Leaving: _____

Company Name: _____ Location: _____
Last Position: _____ Supervisor: _____
Starting Date: _____ Ending Date: _____
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Relevant Duties/Skills : _____
Reason for Leaving: _____

Company Name: _____ Location: _____
Last Position: _____ Supervisor: _____
Starting Date: _____ Ending Date: _____
Starting Wage: _____ Ending Wage: _____
Relevant Duties/Skills : _____
Reason for Leaving: _____

REFERENCES - Please list three references other than relatives.

Name: _____ Relationship: _____
Company: _____ Position: _____
Phone: _____ Email: _____

Name: _____ Relationship: _____
Company: _____ Position: _____
Phone: _____ Email: _____

Name: _____ Relationship: _____
Company: _____ Position: _____
Phone: _____ Email: _____

If there is anything else you would like to share about yourself, you may do so below.

Did you complete this application yourself? Yes No If not, who did? _____

I certify that the answers given in this application are true to the best of my knowledge.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give QC|Plastics permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release QC|Plastics from any liability as a result of such contract.

I understand that the use of this application form does not indicate that there are any positions open and does not in any way obligate QC|Plastics.

I understand that should I be granted an interview, no representations that may be made at the interview are to be construed as creating any obligation, promise or contract on behalf of QC|Plastics.

Further, in consideration of my employment, I agree to conform to the policies and procedures of QC|Plastics, as they may from time to time be implemented or revised, and that, my employment and compensation can be terminated with or without cause, and with or without notice, at any time, for any lawful reason or for no reason at all at the option of either QC|Plastics or myself.

I understand that acceptance for employment may depend on satisfactory replies from my references and other background checks. In the event I receive a job offer, I also understand that I may be subject to a drug test and/or a medical examination that I must pass before I commence work.

I have read, understood and agree to the foregoing.

Signature: _____ Date: _____

Please note, if completing this form electronically, typing your name will serve as your e-signature.

Please check this statement to signify reading and understanding this statement.

Thank you for completing this application form and for your interest in our business.