

BIBBERO SYSTEMS, INC. — APPLICATION FOR POSITION — Production Department
1300 N. McDOWELL BLVD., PETALUMA, CALIFORNIA 94954-1180
TELEPHONE: (707) 778-3131

(In answering questions,
use extra blank sheet
if necessary)

AN EQUAL OPPORTUNITY EMPLOYER

No employee, applicant, or candidate for promotion, training or other advantage shall be discriminated against (or given preference) because of race, color, religion, sex, age, physical handicap, veteran status, or national origin.

Date of Application

PLEASE READ CAREFULLY AND WRITE OR PRINT ANSWERS TO ALL QUESTIONS. DO NOT TYPE.

A. PERSONAL INFORMATION				
Name - Last	First	Middle	Social Security No.	Home Telephone ()
Present Address: - Street			(Apt #)	City State Zip
Person to notify in case of Emergency or Accident - Name:			Telephone:	
Address:			Telephone:	
B. EMPLOYMENT INFORMATION				
Position Desired:	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Either	Date Available For Employment:	Wage/Salary Expectations:	
Working Hours Desired (Chk. 1 or More) Full Time: <input type="checkbox"/> 6 am-2:30 pm <input type="checkbox"/> 9 am-5:30 pm <input type="checkbox"/> 2 pm-10:30 pm Part Time: <input type="checkbox"/> am <input type="checkbox"/> pm	List Any Hrs./Days You Are Not Available: (Except for times required for religious practices or observances)	Can You Work Overtime, If Necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No Graveyard Shift, If Necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No 10:00 pm - 6:30 am		
Are You Employed Now?: <input type="checkbox"/> Yes <input type="checkbox"/> No	If So, May We Inquire Of Your Present Employer?: <input type="checkbox"/> No <input type="checkbox"/> Yes, If Yes: Name Of Employer: Phone Number: ()			
Have You Applied For A Position With This Office Before? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, When?: Month and Year Location				
Are you able to perform the essential functions of the job for which you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, describe the functions that cannot be performed		Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? <input type="checkbox"/> Yes <input type="checkbox"/> No (Convictions for marijuana-related offenses that are more than two years old need not be listed.) If yes, state nature of the crime(s), when and where convicted and disposition of the case		
<i>(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)</i>		<i>(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)</i>		
Referred By / Or Where Did You Learn Of This Job?:				
Can You, Upon Employment, Submit Verification Of Your Legal Right To Work In The United States?: <input type="checkbox"/> Yes <input type="checkbox"/> No Submit Proof That You Meet Legal Age Requirement For Employment? <input type="checkbox"/> Yes <input type="checkbox"/> No			Language(s) Applicant Speaks or Writes (If Use Of A Language Other Than English is Relevant To The Job For Which The Applicant Is Applying:	
C. EDUCATIONAL HISTORY				
Name & Address Of Schools Attended (Include Current)	Number of Months / Years Attended	Highest Grade/Level Completed	Diploma/Degree(s) Obtained/Areas of Study	
High School				
College			Degree/Major	
Post Graduate			Degree/Major	
Business / Trade / Technical			Course/Diploma/License/Certificate	
Other			Course/Diploma/License/Certificate	
Specific Training, Skills, Education, Or Experiences Which Will Assist You In The Job For Which You Have Applied.				
Membership / Professional or Civic Organizations (Excluding those that disclose race, color, religion or national origin)				
Future Educational Plans				
Military - Did you serve in the armed forces <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Branch?: Training relevant to position for which you are applying:				
D. REFERENCES — List below two persons NOT related to you who have knowledge of your work performance within the last three years.				
(1)	Name	Address	Telephone Number	(<input type="checkbox"/> Work <input type="checkbox"/> Home) Occupation Years Acquainted
(2)	Name	Address	Telephone Number	(<input type="checkbox"/> Work <input type="checkbox"/> Home) Occupation Years Acquainted
Please Feel Free To Add Any Information Which You Feel Will Help Us Consider You For Employment				

E. EMPLOYMENT RECORD INFORMATION SUPPLIED ON ATTACHED RESUME

LIST MOST RECENT EMPLOYMENT FIRST (Full or Part-Time) **May We Contact Your Previous Employer(s) For A Reference?** Yes No

1) Employer / Company Name					Type of Business:	
Address	Street	City	State	Zip Code	Work Performed. Be Specific:	
Phone Number ()						
Your Position			Dates <u>Mo.</u> <u>Yr.</u> <u>Mo.</u> <u>Yr.</u>			
			From To			
Supervisor's Name			Hourly Rate/Salary			
			Starting Final			
Reason For Leaving						
2) Employer / Company Name					Type of Business:	
Address	Street	City	State	Zip Code	Work Performed. Be Specific:	
Phone Number ()						
Your Position			Dates <u>Mo.</u> <u>Yr.</u> <u>Mo.</u> <u>Yr.</u>			
			From To			
Supervisor's Name			Hourly Rate/Salary			
			Starting Final			
Reason For Leaving						
3) Employer / Company Name					Type of Business:	
Address	Street	City	State	Zip Code	Work Performed. Be Specific:	
Phone Number ()						
Your Position			Dates <u>Mo.</u> <u>Yr.</u> <u>Mo.</u> <u>Yr.</u>			
			From To			
Supervisor's Name			Hourly Rate/Salary			
			Starting Final			
Reason For Leaving						

F. SPECIAL SKILLS — LIST BELOW ALL PRINTING & BINDERY EQUIPMENT YOU HAVE USED

TYPE (PRESS, FOLDER, CAMERA, ETC.)	MODEL & SIZE	EXPERIENCE		WHEN		
		YRS.	MOS.	FROM	—	TO
					—	
					—	
					—	
					—	
					—	
					—	
					—	
					—	

Other Kinds Of Task Performed Or Skills That May be Applicable To Position:

READ THE FOLLOWING CAREFULLY, THEN SIGN AND DATE THE APPLICATION

The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. If you decide to engage an investigative consumer reporting agency to report on my credit and personal history I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.

If requested, I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the company, that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written.

Date: _____ Signature: _____