



EMPLOYMENT APPLICATION

EQUAL EMPLOYMENT: IPPI CONSIDERS APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, NATIONAL ORIGIN, AGE, HANDICAP, DISABILITY, SEXUAL ORIENTATION, MARITAL OR VETERAN STATUS, OR ANY OTHER CHARACTERISTICS PROTECTED BY FEDERAL, STATE, OR LOCAL LAWS, EXCEPT WHERE GENDER OR ANY OTHER CHARACTERISTIC IS A BONA FIDE OCCUPATIONAL QUALIFICATION.

Last Name		First Name			Middle Name	
Address - Number	Street	Apt #	City	State	Zip Code	
Telephone Number:						

Position Desired:	Date of Application:
Hours Preferred: Full-Time _____ Part-Time _____	
Shift Preference: 1 st _____ 2 nd _____ 3 rd _____	Are you available for any shift? Yes _____ No _____

	Yes	No
Have you applied to IPPI previously? If yes -	[]	[]
▪ Date(s) of application(s):		
Have you previously worked for IPPI? If yes -	[]	[]
▪ Date(s) and location(s):		
▪ Last name if different:		
Are any of your relatives or friends presently employed by IPPI? If yes -	[]	[]
▪ Name(s) and Relationship		
Are you legally authorized to work in the U.S.?	[]	[]
Are you 18 years or older?-	[]	[]
If hired, do you have reliable transportation to get to work?	[]	[]

EDUCATION						
Type of School	Dates		Name and Address of School	Major Course of Study	Graduate Yes/No	Diploma/Degree Earned
	From Mo/Yr	To Mo/Yr				
High School						
Undergraduate						
College						
Post Graduate						
Other (Specify)						

CERTIFICATIONS: List certifications, licenses, applicable courses, or trainings relevant to the position you are seeking:

WORK EXPERIENCE: PLEASE ANSWER ALL QUESTIONS. Do not refer to resume, even if it is attached. Start with your present or most recent job and list all your work experience. Include military experience. If you need additional space, continue on a separate sheet of paper.

PRESENT OR LAST EMPLOYER

Employer	Dates Employed From: _____ To: _____	Work Performed
Address:		
Phone Number		
Job Title		
Job Title		
Supervisor		
May we contact this employer Yes _____ No _____		

WORK EXPERIENCE: PLEASE ANSWER ALL QUESTIONS. Do not refer to resume, even if it is attached. Start with your present or most recent job and list all your work experience. Include military experience. If you need additional space, continue on a separate sheet of paper.

NEXT PREVIOUS EMPLOYER

Employer	Dates Employed From: _____ To: _____	Work Performed
Address:		
Phone Number		
Job Title		
Job Title		
Supervisor		
May we contact this employer Yes _____ No _____		

WORK EXPERIENCE: PLEASE ANSWER ALL QUESTIONS. Do not refer to resume, even if it is attached. Start with your present or most recent job and list all your work experience. Include military experience. If you need additional space, continue on a separate sheet of paper.

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May we contact this employer Yes No		

WORK EXPERIENCE: PLEASE ANSWER ALL QUESTIONS. Do not refer to resume, even if it is attached. Start with your present or most recent job and list all your work experience. Include military experience. If you need additional space, continue on a separate sheet of paper.

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Address:		
Phone Number		
Job Title		
Job Title		
Supervisor		
May we contact this employer Yes No		

What are your goals and how does this position fit in with your goals?

PROFESSIONAL REFERENCES:				
Please list <i>professional</i> references. Do not include relatives.				
Name	Relationship	Address	Phone	Years Known

How did you hear about IPPI?

Newspaper Ad (specify) _____ Internet _____ Job Fair(specify where) _____

Employment Agency _____ Dept. of Labor _____

IPPI Employee (name) _____ Relative _____ Friend _____

Other (specify) _____

STATEMENT

The following statement must be read and signed in order for you application to be considered.

I UNDERSTAND AND AGREE THAT:

The information that I provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application can be justification for refusal of employment, or, if employed, termination from IPPI.

Any offer of employment I may receive is contingent upon my successful completion of IPPI’s total pre-employment screening process, including, but not limited to IPPI’s receiving references that it considers satisfactory, and receipt by IPPI of a satisfactory background investigation.

If employed, I will comply with the policies, rules, regulations and procedures of IPPI. I understand that my employment is “at will” and can be terminated with or without cause, at any time, at the option of IPPI or myself. IPPI reserves the right to add, amend, or discontinue any polices, practices, procedures, benefits or services at any time.

Signature of Applicant _____

Date: _____