

THE SHOPPING NEWS

of Lancaster County

CARRIER EMPLOYMENT APPLICATION

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

P E R S O N A L	Last Name		First	Middle	Date
	Street Address				Home Phone ()
	City, State, Zip				Cell Phone ()
	Have you been employed by us previously? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month and Year _____ Position _____				Email
	Delivery Area Desired				
	Are you legally eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	Do you have Reliable Transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	Do you have a Valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you have Current Auto Insurance & Registration? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Other special training or skills (languages, machine operation, etc.)					

E D U C A T I O N	School	Name and Location of School	Course of Study	No. of Years Completed	Did You Graduate?	Degree or Diploma
	Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Business/Trade Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	

