

Last Name	First	Middle	For personnel use			Date of application				
Street address			Type(s) of work desired			Social security no.				
City		State	ZIP code		Telephone no. Home: Work:					
How were you referred to Company? (Circle only one)	A By your college	B Advertisement	C Employment Agency	D By an employee	If so, give name:	E Military service	F Walk-in	G Resume or letter	H Open house	I Other

Application for Employment

Sunrise
1805 Lincoln Way East
Chambersburg, PA 17202

Sunrise Electronic Distributing Company

Your complete application form will be maintained in our active files for six (6) months from the date of application. You may submit a new application at any time.

We are an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran or Vietnam-era veteran. Information provided on this application will not be used for any discriminatory purpose.

Educational History

School name	Location (street address)..	Location (city, state)	Major course or subject	Graduated		Degree
				Yes	No	
High school						
Technical/trade (after high school)						
College (list all attended)						
Other education/training						

Outside Activities

(Exclude those indicating race, color, religion, sex, national origin, age, handicap, or Vietnam-era veteran status)

Professional memberships, certificates, or licenses held

Past and present civic or cultural activities — include offices held

Principal hobbies

Special Skills

To be completed by applicant for office/clerical work

To be completed by applicant for shop/plant work

<i>To be completed by applicant for office/clerical work</i>		<i>To be completed by applicant for shop/plant work</i>	
Typing	<input type="checkbox"/> Yes Words per minute <input type="checkbox"/> No	Type of machines operated	Years experience
Electronic Skills	<input type="checkbox"/> Yes Type <input type="checkbox"/> No		
Computer skills	<input type="checkbox"/> Hardware <input type="checkbox"/> Software		

Please list other skills and/or computer equipment/computer language experience you have acquired

List other shop/production skills

Served apprenticeship Yes When served
 No

Type of apprenticeship

Miscellaneous

Were you previously employed by Company?	<input type="checkbox"/> Yes If yes, when <input type="checkbox"/> No
Have you been convicted of any crimes other than minor traffic violations during the past seven years?	<input type="checkbox"/> Yes If yes, list below <input type="checkbox"/> No (A conviction record will not necessarily bar you from employment)
Will visa or immigration status prevent lawful employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Would you be willing to work other than the day shift?	<input type="checkbox"/> Yes If yes, which shifts? <input type="checkbox"/> No

Employment Record

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach resume, but complete application as well.

Last or present company		Title or job classification	
Type of business			
Street address		Brief description of job duties	
Phone no.			
City		State	
		ZIP code	
Supervisor's name and title			
Phone no.			
Base salary	Dates worked		
	From	To	
Reason for leaving			
Company		Title or job classification	
Type of business			
Street address		Brief description of job duties	
Phone no.			
City		State	
		ZIP code	
Supervisor's name and title			
Phone no.			
Base salary	Dates worked		
	From	To	
Reason for leaving			
Company		Title or job classification	
Type of business			
Street address		Brief description of job duties	
Phone no.			
City		State	
		ZIP code	
Supervisor's name and title			
Phone no.			
Base salary	Dates worked		
	From	To	
Reason for leaving			

U.S. Military Record

Branch of service _____ From _____ To _____

Present military affiliation:

None Reserve (active) Reserve (inactive)

Kinds of training and duty while in service _____

Professional/Work References

List two past supervisors and one person who is not related to you who have knowledge of your qualifications for the position for which you are applying.

Name	Title/relationship	Address (street, city, state, zip code)	Phone no. (include area code)	Occupation

May we contact your present employer? Yes No

Wage or salary required _____

Date available _____

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service, if employed. I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment and my continued employment depends upon the will of the company or myself.

_____ Date

_____ Signature

If any of your educational or employment records are under other than the above name, please provide other names.
0699 Part No. 000-000-000