Application for Employment



Laparkan Trading Limited

New York & New Jersey 2350 Linden Blvd. Brooklyn, NY 11208

Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for				Date of appl	ication/	
Name				Social Security #	-	
Address	First		Middle			1
Street		City			ate Zip	p Code
Telephone # (Mobi	ile/Beeper/Other #)		E-mail Address		
Referral Source (How did you hear about us?)						
If you are under 18, and it is required, can you	u furnish a work per	rmit?				□ No
If no, please explain						
Have you ever been employed here before? If						
Are you legally eligible for employment in this						
Date available for work						
Type of employment desired Full-Tir					Educational	Co-Op
Driver's license number if driving may be requi Answering "yes" to the following questions does not co violation, rehabilitation and position applied for will b	red in position for wonstitute an automatic e taken into account.	which you are apply bar to employment. I	ying Factors such	as date of the offense, s	State seriousness and nature	e of the
Have you ever pled "guilty" or "no contest" to						
	*					
5) 185						
Employment History						
Starting with your most recent employer, pro	vide the following is	nformation.				
Employer	Telephone #	A STANDARD SOLITOR OF THE STAN	Dates employ	Month / Year	to Month / Y	Year
Street address	City	State	Bucco cimpto	Compensation (
Starting job title/final job title			Hourly	Salary	\$ per	
Immediate supervisor and title (for most recent position held)	May	y we contact for reference?	Commission/	Bonus/Other Compensation Compensation	(Final)	
		Yes No Later	Hourly		\$ per	
Why did you leave?			Commission/	Bonus/Other Compensation	\$	
Summarize the type of work performed and job responsibilities.						
What did you like most about your position?						
What were the things you liked least about the position?						
Employer	Telephone #		Dates employ	ved: Month / Year	to Month /	Year
Street address	City	State	BEASIN.	Compensation (1966
Starting job title/final job title	**		Hourly		\$ per	
Immediate supervisor and title (for most recent position held)	May	y we contact for reference?	Commission/	Bonus/Other Compensation Compensation	\$ (Final)	
Why did you leave?		Yes No Later	Hourly		\$ per	
			Commission/	Bonus/Other Compensation	\$	
Summarize the type of work performed and job responsibilities.						
What did you like most about your position?						
What were the things you liked least about the position?						
Employer	Telephone #		Dates employ	yed: Month / Year	to Month /	Year
Street address	City	State	Section 1	Compensation (NAME OF TAXABLE PARTY.	
Starting job title/final job title			L Hourly		\$ per \$	
Immediate supervisor and title (for most recent position held)	May	y we contact for reference?	Commission	Compensation		
Why did you leave?		Yes No Later	Hourly		\$ per	
Summarize the type of work performed and job responsibilities.			Commission/	Bonus/Other Compensation	\$	
What did you like most about your position?						
What were the things you liked least about the position?						
mac were the things you tiked teast about the position:						

Skills and Qualifications	1/ 10				£ 1.1		
Summarize any special training, skills, licer	nses and/or certificates tha	at may assist you	in perfor	ming the position	n for which	you are applying	
Computer Skills (Check appropriate boxes. In	clude software titles and years	of experience.)					
☐ Word Processing	Years:	E-mail				Years:	
Spreadsheet	Years:						
Presentation						Years:	
Educational Background		0					
Starting with your most recent school atten-	ded, provide the following				Security of the		
School (include City & State)		Years Completed		Completed	GPA Class Rank	Major/Minor	
			□ Diploma □ Degree	□ GED			
			Certification Other Diploma GED Degree Certification				
	1.5.678.6	☐ Other ☐ GED		☐ GED			
			☐ Degree ☐ Certification				
			Other		-		
References			960 (27)				
List name and telephone number of three	business/work references	who are <i>not</i> rela	ted to you	and are not prev	ious supervi	sors.	
If not applicable, list three school or person	nal references who are <i>not</i>			I market and a second			
Name	Title	Relations to You		Telephone		Number of Years Known	
				()			
				()			
AND THE RESERVE OF THE PARTY OF			()				
Applicant Statement							
I certify that all information I have provided in order	to apply for and secure work w	ith this employer is	true, comple	ete and correct.			
I expressly authorize, without reservation, the employ professional), employers, public agencies, licensing at	ver, its representatives, employee	es or agents to conta	ct and obtain	n information from al	ll references (pe	ersonal and	
application, resumé or job interview. I hereby waive a gathering and using truthful and non-defamatory info	any and all rights and claims I m	nay have regarding t	he employer,	its agents, employees	s or representat	ives, for seeking,	
furnishing such information about me.							
I understand that this employer does not unlawfully applicant from consideration for employment on any	discriminate in employment and basis prohibited by applicable l	d no question on the local, state or federa	is application l law.	is used for the purpo	ose of limiting	or eliminating any	
I understand that this application remains current for employment, it will be necessary for me to reapply an	only 30 days. At the conclusion of fill out a new application.	n of that time, if I h	ave not hear	d from the employer	and still wish to	o be considered for	
If I am hired, I understand that I am free to resign at a employment at any time, with or without cause and w for employment for any specified period or definite du contrary and that no implied oral or written agreemen	ith or without prior notice, exceptration. I understand that no sup	pt as may be require ervisor or representa	d by law. Thi tive of the en	is application does no nployer is authorized	t constitute an a to make any ass	agreement or contract surances to the	
I also understand that if I am hired, I will be required require me to complete an I-9 Form in this regard.		0 0				2	
I understand that any information provided by me from further consideration for employment, or (ii)						e to (i) eliminate me	
DO NOT SIGN UNTIL YOU HAVE I I certify that I have read, fully und					tatement.		
Signature of Applicant						/ /	



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