



LASTING IMAGE

Promotional Products and Apparel®

The customer comes before everything we do. Common respect of each other will create a teamwork to build company strengths, as well as employee's personal and professional goals. We will do business with each other, our vendors and our customers ethically, honestly and with 100% commitment.

Employment Application

Whatever  it takes.

Employment Application

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, use of lawful products during non-work hours and any other legally protected status.

PLEASE PRINT

Position(s) Applied For:		Date of Application	
Last Name		First Name	Middle Name
Address			
City		State	Zip
Home Phone Number ()	Work Phone Number ()	Social Security Number	
How did you learn about the company? (Circle one): Advertisement Friend Walk-In Current Employee Recruiting Firm: Other:			
Are you available for work:		Regular Full-time:	Regular Part-time:
Temporary:		Hours Preferred to work:	
If you are less than 18 years of age, can you provide required proof of you eligibility to work?		Yes	No
Have you ever applied with the company before?		Yes	No
If yes, please give date: _____			
Have you ever been employee with the company before?		Yes	No
If yes, please give date: _____			
Are you currently employed?		Yes	No
May we contact your present employer for references?		Yes	No
Are you legally qualified to work in the United States? (Proof of citizenship or immigration status will be required upon employment.)		Yes	No
On what date would you be available for work? _____			
Do you have a valid driver's license? Yes/No			
If Yes, Drivers license Number _____ State _____ Date of Issue _____			
Have you ever been convicted of, pled guilty or no contest to a felony or other crime? Yes/No			
If Yes, Please explain (A "yes" answer will not necessarily disqualify you from employment. _____			

EDUCATION	Elementary School	High School	Technical School	College	Other
School Name and Location					
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma / Degree		Yes No	Yes No	Yes No	
Major Course(s) of Study					

Summarize special skills and training not listed above:

Describe honors received:

List professional, trade, business, or civil activities and offices held.
 You may exclude memberships which may reveal sex, race, religion, national origin, age, or disability or other protected status:

EMPLOYMENT EXPERIENCE

Start with your present or most recent position

1. Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Job Title	Base Pay		
Supervisor	Start	Final	
Reason for Leaving			

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Telephone Number(s)			
Job Title	Base Pay		
Supervisor	Start	Final	
Reason for Leaving			

Promotional Experience

please fill out if you have had any experience in or as a sales person in the promotional industry

How long have you been in the industry?

Are you a...? (circle one) MAS CAS NOT SURE

What is your total sales volume?

What is your average sales margin?

What are your top 5 accounts sales volumes *(you do not need to disclose the accounts)*

- 1.
- 2.
- 3.
- 4.
- 5.

YES NO

Do you have experience selling programs? for example, service awards, safety programs? *(circle one)*

Top 10 suppliers that you like to use?

- | | |
|----|-----|
| 1. | 6. |
| 2. | 7. |
| 3. | 8. |
| 4. | 9. |
| 5. | 10. |

Have you or do you like to attend industry shows? *(circle one)* YES NO

Do you keep ahead of the game in terms of education and knowledge of products? *(circle one)* YES NO

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Have you ever had any job-related training in the United States military?	Yes	No
If yes, please give date:		
Are you able to perform the essential requirements of the job?	Yes	No

Are there any reasonable accommodations that should be made to allow you to perform the essential functions of the job?

Is there any type of work you do not want to perform, can not perform or refuse to perform?

State any additional information you feel may be helpful to us in considering your application.

REFERENCES		
<i>Please provide us with three business references who are not related to you.</i>		
NAME	ADDRESS	PHONE NUMBER
		()
		()
		()

**PLEASE FILL OUT APPLICATION AND FAX PAGES BACK TO LASTING IMAGE - ATTN: MARGUERITE KLINE
610.670.4906**

I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at anytime and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by written documentation or conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, that I am required to abide by all rules and regulations of Employer.

Signature of Applicant _____ Date _____