



105 Airport Road  
 Pottstown, PA 19464  
 610-495-7495  
 Buckmansinc.com

## APPLICATION FOR EMPLOYMENT

*Buckman's Incorporated is an Equal Opportunity Employer. Applicants are considered for hire without regard to race, color, religion, creed, sex, marital status, age, or disability.*

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### GENERAL INFORMATION

Are you able to perform the essential job functions of the position for which you are applying?  YES  NO

Have you ever been convicted of criminal activity?  YES  NO If yes, please explain.

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Are you willing to undergo a Criminal Record Check?  YES  NO

*(Based on the findings of the Criminal Record Check in relation to the relevant job requirements, you may or may not be considered for the position for which you are applying.)*

### EDUCATION & TRAINING

	Name & School Location	# of Years Attended	Did You Graduate?	Major Studied (if applicable)
High School			<input type="checkbox"/> YES <input type="checkbox"/> NO	
College			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Trade School			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Graduate School			<input type="checkbox"/> YES <input type="checkbox"/> NO	

**SKILLS & EMPLOYMENT DESIRED**

Please list any personal skills or abilities that are relevant to the position for which you are applying.

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Are you willing to work the following if necessary?

Varying Shifts YES NO - Overtime YES NO - Evenings YES NO - Weekends YES NO

Position Applying For: \_\_\_\_\_

Date You Can Start? \_\_\_\_\_ Desired Compensation? \_\_\_\_\_

Are You Currently Employed? YES NO If so, may we contact your current employer? YES NO

Have you ever applied to Buckman’s Incorporated before? YES NO

If so, when, and for what position? \_\_\_\_\_

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**EMPLOYMENT HISTORY**

Employer Name \_\_\_\_\_ Employer Address \_\_\_\_\_ Employer Phone Number \_\_\_\_\_

Position \_\_\_\_\_ Compensation \_\_\_\_\_ Dates Employed \_\_\_\_\_

Reason For Leaving \_\_\_\_\_

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Employer Name \_\_\_\_\_ Employer Address \_\_\_\_\_ Employer Phone Number \_\_\_\_\_

Position \_\_\_\_\_ Compensation \_\_\_\_\_ Dates Employed \_\_\_\_\_

Reason For Leaving \_\_\_\_\_

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Employer Name \_\_\_\_\_ Employer Address \_\_\_\_\_ Employer Phone Number \_\_\_\_\_

Position \_\_\_\_\_ Compensation \_\_\_\_\_ Dates Employed \_\_\_\_\_

Reason For Leaving \_\_\_\_\_

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*I certify that all the information submitted on this application is accurate and complete, and I understand that providing any false information will result in denial of employment or termination. I understand that if hired, I will be an “at will” employee and can be terminated at any time for any reason, or may resign employment at any time for any reason.*

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_