



LAST

FIRST

MIDDLE

1309 Mt. Eustis Road, Littleton, NH 03561

PERSONAL INFORMATION

NAME		MAIDEN NAME	
PRESENT ADDRESS		APT. NO.	ARE YOU 18 YEARS OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO
CITY	STATE	ZIP	PHONE
E-MAIL ADDRESS			

DESIRED EMPLOYMENT

POSITION		SHIFT AVAILABILITY <input type="checkbox"/> Day Shift (hours vary) <input type="checkbox"/> Middle Shift (12:30-9:00) <input type="checkbox"/> Evening Shift (2:30-11:00)		HOURS PREFERRED: HOURS _____ <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SUMMER <input type="checkbox"/> TEMPORARY	
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE YOU CAN START				
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?				WHEN?
EVER WORKED FOR THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?				WHEN?
WHO REFERRED YOU TO THIS COMPANY? <input type="checkbox"/> NEWSPAPER ADVERTISING <input type="checkbox"/> FRIEND/RELATIVE <input type="checkbox"/> STATE EMPLOYMENT OFFICE <input type="checkbox"/> WALK IN <input type="checkbox"/> OTHER _____					
LIST ANY FRIENDS OR RELATIVES WORKING AT LCC _____					

EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL OR G.E.D.				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK _____

SPECIAL TRAINING _____

ADDITIONAL ABILITIES:

DATA ENTRY TYPING _____ WPM CALCULATOR NUMERICAL/ACCOUNTING SKILLS

DETAIL ORIENTED 20/20 CORRECTED VISION PRODUCTION CUSTOMER RELATIONS COMMUNICATION SKILLS

TEAM ENVIRONMENT COMPUTER SOFTWARE USED _____

Card Sent

ABRA

FORMER EMPLOYERS

LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST

NAME OF PRESENT OR LAST EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY/HOURLY STARTING SALARY	WEEKLY/HOURLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR	SUPERVISOR'S TITLE	PHONE	
DESCRIPTION OF WORK		REASON FOR LEAVING	

NAME OF PRIOR EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY/HOURLY STARTING SALARY	WEEKLY/HOURLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR	SUPERVISOR'S TITLE	PHONE	
DESCRIPTION OF WORK		REASON FOR LEAVING	

NAME OF PRIOR EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY/HOURLY STARTING SALARY	WEEKLY/HOURLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR	SUPERVISOR'S TITLE	PHONE	
DESCRIPTION OF WORK		REASON FOR LEAVING	

HAVE YOU EVER BEEN CONVICTED OF A FELONY? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, EXPLAIN (WILL NOT NECESSARILY EXCLUDE YOU FROM CONSIDERATION)

REFERENCES

BELOW, GIVE THE NAMES OF THREE PERSONS YOU ARE NOT RELATED TO, WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR

	NAME	FULL ADDRESS	PHONE NUMBER	BUSINESS	YEARS ACQUAINTED
1					
2					
3					

NUMERICAL ABILITY (Select the correct answer.)

1. $13 - 9 =$	4	2	3	5
2. $27 + 29 =$	56	46	55	57
3. $13 \times 13 =$	149	179	169	159
4. $128 \div 8 =$	15	16	14	21
5. $324 \div 18 =$	16	19	26	18
6. $.4 \times .7 =$	2.8	28	.28	.028
7. $.07 + .6 =$	.67	6.7	.13	1.3
8. $1.78 - .7 =$	.171	1.71	.108	1.08
9. $2.08 + 1.52 =$	3.6	.36	4.32	3.32
10. $75 \div .5 =$	.15	150	1.50	1500

WORD COMPREHENSION (Select the word that best matches the word in CAPS.)

1. SUBTRACT	all	forget	less	better
2. EXTERNAL	random	outside	flatter	old
3. ORIGINATES	monkey	infests	demands	starts
4. SOLVE	cheap	answer	fear	sell
5. DECIMAL NO.	.018	3/16	2-1/2	\$12
6. CORRECT	strong	useful	design	right
7. SCHEDULE	attack	coach	plan	clean
8. LEAD	direct	carton	taste	fix
9. TRANSFER	move	make	water	dance
10. EXPLAIN	leave	tell	river	skill

"I CERTIFY THAT ALL THE ABOVE INFORMATION AND ANY RESUME IS TRUE AND COMPLETE. I UNDERSTAND THAT ANY MISREPRESENTATION OR OMISSION MAY RESULT IN MY DISQUALIFICATION FROM FURTHER CONSIDERATION FOR EMPLOYMENT OR MY TERMINATION FROM EMPLOYMENT.

Further, in order that Littleton Coin Company may process my application for employment, I hereby authorize Littleton Coin Company and its subsidiaries, officers, directors, employees, representatives, and agents (hereinafter collectively referred to as "the Company") to conduct a complete investigation into my background including, but not limited to, inquiring into my entire employment history, including my fitness for duty at all prior employment; education history; **credit history**; criminal record and military record, if any; to obtain opinions and references regarding my moral character and reputation and to solicit and obtain any other information the Company, in its sole discretion, deems as necessary to determine my eligibility for employment or for the purposes of confirming the accuracy or completeness of any information I have provided to the Company. In consideration for the processing of my application for employment with the Company, I hereby RELEASE, INDEMNIFY, AND HOLD HARMLESS LITTLETON COIN COMPANY from any and all liability based on their authorized receipt, disclosure, and use of the information gathered in processing my application for employment.

I UNDERSTAND THAT, IF HIRED, ANY OFFER IS CONTINGENT UPON PRODUCTION OF PROOF OF EMPLOYMENT ELIGIBILITY AND THE COMPLETION OF A FORM I-9."

DATE

SIGNATURE