



THE **PRINT** SHOP

## EMPLOYMENT APPLICATION

312 MALL BOULEVARD | SAVANNAH, GEORGIA 31406

[WWW.THEPRINTSHOP.NET](http://WWW.THEPRINTSHOP.NET)

REV 1/2026

## APPLICANT'S PERSONAL INFORMATION

Name: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Current Address: \_\_\_\_\_

Drivers License No. (if applicable): \_\_\_\_\_

Current Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

How long at current address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Do you have a valid driver's license?  Yes  No

Are you 18 years or older?  Yes  No

Are you a legal U.S. citizen?  Yes  No

Are you currently employed?  Yes  No If yes, what is your job status?  Full Time  Part Time

Why did you apply for employment with The Print Shop of Savannah? \_\_\_\_\_

What position have you applied for? \_\_\_\_\_ When can you start? \_\_\_\_\_

Do you have any salary or pay requirements?  Yes  No If yes, what are they? \_\_\_\_\_

What type of benefits, perks or compensation have previous employers offered you above your regular salary or pay? \_\_\_\_\_

What type of employment interests you:  Full Time  Part Time  Seasonal: Time of year? \_\_\_\_\_

If Part Time - what days/hours are you available to work? \_\_\_\_\_

Have you ever worked with us before?  Yes  No If yes, when? \_\_\_\_\_

Have you worked at a Printing or similiar company before?  Yes  No If yes, In what capacity? \_\_\_\_\_

If No, what do you have to offer our company? Why should you be considered for a position at The Print Shop? \_\_\_\_\_

Do you know of a friend, family member or other acquaintance that currently holds a position at The Print Shop? \_\_\_\_\_

Yes  No If yes, who do you know? \_\_\_\_\_

Are you able to speak any foreign language(s) fluently?  Yes  No Which? \_\_\_\_\_

What else would you like share about yourself (military experience, internship/work experience, etc.)? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Applicant's Educational History

Name(s) and Address(es) of School(s)		Circle last grade completed	Graduated	GPA, Degree/Major
High School		9	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		10		
		11	Month/Year of Graduation: _____	
		12		
College - Undergrad		FR	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		SM		
		JR	Month/Year of Graduation: _____	
		SR		
College - Graduate		Masters	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		Doctorate		
		Other: _____	Month/Year of Graduation: _____	

## Applicant's Employment History

5 Present or Most Recent Employer		Job Information
Name		Position or Job Title:
Address, City, State, Zip		Date Employed (Month/Year):
Contact Name and Phone		Salary or Hourly Pay (Start - Ending):
What was your reason for leaving?		What other information should we know about this job?
4 Other Recent Employer		Job Information
Name		Position or Job Title:
Address, City, State, Zip		Date Employed (Month/Year):
Contact Name and Phone		Salary or Hourly Pay (Start - Ending):
What was your reason for leaving?		What other information should we know about this job?

## Applicant's Employment History (continued)

3	Other Recent Employer	Job Information
Name	Position or Job Title:	
Address, City, State, Zip	Date Employed (Month/Year):	
Contact Name and Phone	Salary or Hourly Pay (Start - Ending):	
What was your reason for leaving?	What other information should we know about this job?	

2	Other Recent Employer	Job Information
Name	Position or Job Title:	
Address, City, State, Zip	Date Employed (Month/Year):	
Contact Name and Phone	Salary or Hourly Pay (Start - Ending):	
What was your reason for leaving?	What other information should we know about this job?	

1	Other Recent Employer	Job Information
Name	Position or Job Title:	
Address, City, State, Zip	Date Employed (Month/Year):	
Contact Name and Phone	Salary or Hourly Pay (Start - Ending):	
What was your reason for leaving?	What other information should we know about this job?	

## Applicant's Personal References

	Name	Address, City, State, Zip	Phone	Relationship
1				
2				
3				
4				
5				