

Sales/Marketing Associate, Trade Shows/Exhibits Employment Application

Submit by e-mail, print and send by USPS mail, or upload on our Web site at this URL:
http://ahlpub.com/Contact_Us.html

Date:

Name:

Address:

State/Province:

Zip/Postal Code:

SS Number:

Home Phone:

Cell Phone:

Positions applied for:

Salary desired:

Hours available to work:

| | |
|-------|----------------------|
| Mon | <input type="text"/> |
| Tues | <input type="text"/> |
| Wed | <input type="text"/> |
| Thurs | <input type="text"/> |
| Fri | <input type="text"/> |
| Sat | <input type="text"/> |
| Sun | <input type="text"/> |

Full-Time part-time Full or part-time

When available to begin work?

Education

| Type of School | Name of School and Complete Mailing Address | No. Years Completed | Major or Degree |
|------------------------------|---|---------------------|-----------------|
| High School | | | |
| College Bus. or Trade School | | | |
| Professional School | | | |
| Other | | | |

Have you ever been convicted of a crime: yes no

If yes, please explain

Do you have a drivers license? yes no

State of issue:

Have you had any accidents in the past 3 years? yes no

How many?

Do you had any moving violations in the past 3 years? yes no

How many?



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USA
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Fax: 856-382-0630
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Hours available for interview/orientation:

Are you available for interview/orientation in between March 21, 2009, and April 11, 2009 ? (in Cherry Hill, NJ)

Yes No Only by phone

What days are you available?

check all that apply

- Mon
- Tues
- Wed
- Thurs
- Fri
- Sat
- Sun

When available for interview/orientation?

am pm Both

Previous Employment (list up to 3)

1.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

2.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

3.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

Skills:

Typing:

Computer: PC Mac Both

Applications (list all that apply):

Other Skills:

Please list 2 references other than relatives and previous employers

| | | |
|-----------|--|--|
| Name | | |
| Position | | |
| Company | | |
| Telephone | | |

Use this space to add any additional information necessary to describe your full qualifications for the position which you are applying:

Signature

Date/Time Field