RTY INC.

Application for Seasonal Employment

An Equal Opportunity Employer

161 Tuscora Ave. NW New Phila., OH 44663

Please complete BOTH	sides. TYPE o	r PRINT in dark ii	nk.		
Name:					
Parmanant Address:	Last Name		First Name		Middle Initial
reilliallelli Address	House Number S	Stroot	City	Stato	Zip Code
	Phone #: ()	Cell #			·
Position Desired					
	PE	RSONAL DA	TA		
Date of Birth:				Age:	
Date of Birth: Have you ever been	employed by R	RTY Inc. before:	Y	ES	NO
If yes, please list					
Do you have a disabi					rform the
work for which		_			
If yes, please	you are applying	·9 ·	_120	110.	
explain:					
5xpiaiii					
	^	VAILABILIT	~		
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YOUR AVAILAE					
STRUNG	BEAKING ON	YOUR ACCEP	TANCE WITH	HRIY, INC	•
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FRIDAY	'S, SATURD	AYS, SUNDA	YS and HO	OLIDA YS	
Preference will be gi	ven to <i>applic</i>	ants who can	work the lo	ngest peri	od of tin
during our season o				,	
I can start wo		MONTH	DAY	YEA	۸R
And continue wor	_	MONTH	DAY	YE	
	_				
	EMPL	DYMENT HIS	TORY		
Employer & Address		Position Held		n for Leaving	a
p. 2 y 2	From:				
	To:				
	From:				
	To:				
	From:				

EDUCATION

School	Name and Address	Major	Circle highest grade completed			
High School			9	10	11	12
College			1	2	3	4
Technical			1	2	3	4
Other			1	2	3	4

REFERENCES						
Name	Occupation	Address	Telephone			
	-					
D	EDSON TO NOTICY I	N CASE OF EMERGEN	ICV			
Name:			ephone:			
Address:			<u> </u>			
House Number	Street C	City State	Zip Code			
permission to investigate a In making this app made whereby information others with whom you ar general reputation, perso written request within a re and scope of this investigate	any of the information in the collication for employment is obtained through the acquainted. This inal characteristics and easonable time to receptation.	included in this application that in this application in the series of the personal interviews with inquiry includes informated and the mode of living. You ive additional, detailed in the series in	at an investigation may be n your neighbors, friends, or ation as to your character, a have the right to make a information about the nature			
Signature:		·	Date:			
Please indica	ate what Sport or oth	er School Activity you	participate in.			