



# Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications. Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all questions.

## PERSONAL DATA

Employer: **Wood Builders, Inc.** Position Applying For: \_\_\_\_\_

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

Street Address / Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_ Cellular Telephone: \_\_\_\_\_

Date You Can Start Work: \_\_\_\_\_ Salary Desired: \_\_\_\_\_ High School Diploma or GED?  Yes  No

## POSITION INFORMATION

Check all that you are willing to work:

**Hours:**  
 Full Time  Part Time  
 Days  Evenings  Swing  Graveyard  Weekends

**Status:**  
 Regular  Temporary

Are you authorized to work in the U.S. on an unrestricted basis?  Yes  No

Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant.)  Yes  No

If yes, explain: \_\_\_\_\_

Have you been told the essential functions of the job or viewed the job description?  Yes  No

Can you perform these essential functions with or without reasonable accommodation?  Yes  No

## QUALIFICATIONS

List any education or training relevant to the position (schools, colleges, degrees, vocational/technical programs, military training).

School Name	Degree / Program	Address / City / State

## SPECIAL SKILLS

List any special skills or experience that would help you in this position (leadership, organizations/teams, certifications, equipment, etc.).

## REFERENCES

List three professional references not related to you (full name, address, phone, relationship). If unavailable, list personal unrelated references.

Name	Address / City / State	Phone	Relationship
1.			
2.			
3.			

**WORK HISTORY — Start with most recent employment and work back. Include paid and unpaid positions.**

<b>Job Title #1</b>		Start Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

**May we contact your present employer?**    Yes    No    N/A

<b>Job Title #2</b>		Start Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

<b>Job Title #3</b>		Start Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

<b>Job Title #4</b>		Start Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.

I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

Applicant Signature

Date