



Application for Employment

PERSONAL INFORMATION

| | | | |
|-----------------|-------------|---------------|-----|
| First Name | Middle Name | Last Name | |
| Address | City | State | Zip |
| Phone Number(s) | | Email Address | |

EMPLOYMENT DESIRED

| | | | |
|---|----------------|----------|---------------------|
| Position(s) Applied For | Desired Salary | Location | Date of Application |
| Have you applied for a position with us before? <input type="checkbox"/> No <input type="checkbox"/> Yes—Specify date: | | | |
| Have you ever been employed with us before? <input type="checkbox"/> No <input type="checkbox"/> Yes—Specify date and position: | | | |
| How did you learn about this position? <input type="checkbox"/> Advertisement—Specify: <input type="checkbox"/> Employment Agency—Specify: <input type="checkbox"/> Employee Referral—Which employee? <input type="checkbox"/> Other—Specify: | | | |
| Do you have any friends or relatives employed by this company? <input type="checkbox"/> No <input type="checkbox"/> Yes—Specify who: | | | |
| Are you currently employed? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| Are you currently on “lay-off” status and subject to recall? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| On what date would you be available for work? | | | |
| Are you available to work: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> All shifts <input type="checkbox"/> Temporary | | | |
| Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No- are you authorized to work in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Can you travel for work if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If hired, do you have a reliable means of transportation to and from work? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If hired, would you be able to work overtime as needed? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Are you willing to take drug tests at the Company’s request? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| Have you ever gone by a name other than the one listed above? <input type="checkbox"/> No <input type="checkbox"/> Yes—Please list: | | | |
| Are you able to perform all of the essential functions of a job for which you are applying with or without reasonable accommodations? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Have you ever been convicted of a felony, misdemeanor, or any other violation? <input type="checkbox"/> No <input type="checkbox"/> Yes—Please list: | | | |

EDUCATION

| | | | |
|--|----------------|------------------|-----|
| Name of High School | | Location | |
| Years Completed | Date Completed | Subjects Studied | GED |
| Diploma obtained: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

| | | | |
|--|----------------|--------------|--------|
| Name of College | | Location | |
| Years Completed | Date Completed | Degree/Major | G.P.A. |
| Diploma obtained? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

| | | | |
|--|----------------|--------------|--------|
| Name of College | | Location | |
| Years Completed | Date Completed | Degree/Major | G.P.A. |
| Diploma obtained? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

GENERAL

| |
|---|
| Subjects of Special Study or Research Work: |
| Special Skills: |
| Activities(Civic, Athletic, etc): |

MILITARY SERVICE

| |
|---|
| Have you ever served in the U.S. military? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>NOTE: If you answered "no" to the above question, please skip the rest of this section.</i> |
| What was the length of your military service? |
| What was your rank at time of discharge? |
| What type of training and work experience did you receive while in the military? |

EMPLOYMENT HISTORY (List the last 3 employers, starting with the last one first)

| | | | |
|---|-------------|--------------|------------|
| Employer (CURRENT or most recent) | | Supervisor | |
| Address | | Phone | |
| Position Title and Duties | | | |
| Starting Date | Ending Date | Starting Pay | Ending Pay |
| Why did you leave this job? | | | |
| May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later | | | |

| | | | |
|---|-------------|--------------|------------|
| Employer | | Supervisor | |
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| Position Title and Duties | | | |
| Starting Date | Ending Date | Starting Pay | Ending Pay |
| Why did you leave this job? | | | |
| May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later | | | |

| | | | |
|---|-------------|--------------|------------|
| Employer | | Supervisor | |
| Address | | Phone | |
| Position Title and Duties | | | |
| Starting Date | Ending Date | Starting Pay | Ending Pay |
| Why did you leave this job? | | | |
| May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later | | | |

REFERENCES (Give Names of 3 persons NOT related to you, known at least ONE year)

| | | |
|------|--------------|-------------|
| Name | Phone Number | Years Known |
| Name | Phone Number | Years Known |
| Name | Phone Number | Years Known |

Please read each statement closely and initial each acknowledging your understanding

Equal Employment Opportunity Statement

This Company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company. **Initial** _____

Discrimination and Sexual Harassment Policy Statement

This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual’s employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual’s work performance or creating an intimidating, hostile or offensive work environment. **Initial** _____

Complete and Accurate Information

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. **Initial** _____

At-Will Employment

I understand and agree that if I am employed, my employment will be “at-will”, which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superseded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by the Company’s president. **Initial** _____

Testing Authorization

If offered a position with the Company, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment. **Initial** _____

Investigation Authorization

I authorize investigation into all statements and references contained in this application. Said investigation may include credit, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background. **Initial** _____

Obligation to Company

I agree that if I become indebted to All American, I will be responsible for repaying the total owed upon termination from All American. If I do not repay the sum prior to my final paycheck being received, the money owed will be deducted from my pay. **Initial** _____

I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE COMPANY.

I also agree and understand that any misrepresentations or omissions of information or facts given on this form shall be considered an act of falsification. I agree and understand the company may investigate any and all information given on this from to determine it validity. I understand that all employment history information from previous employers will be used by the company only as part of decided whether to hire me. If hired, I agree to abide by all rules and policies of this employer.

Signature of Applicant

Date

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*NOTE: For purposes of this document when All American is listed, this refers to All American Lumber DBA: American