

EAST COAST LUMBER

APPLICATION FOR EMPLOYMENT

Date _____

INSTRUCTIONS: Answer every question, **PRINT LEGIBLY**

Name _____ Social Security No. _____
Last First Middle

Present Address _____
No. Street (Apt. No., Bldg. No.) City State Zip

How many years have you lived at this address? _____ Telephone No. (At Home) _____
(For Message) _____

Job(s) applied for: 1. _____ Rate of pay required \$ _____ per _____
2. _____ Rate of pay required \$ _____ per _____

Full Time Part-Time Part-Time Student Part-Time Summer Only Part Time Seasonal Temp.

Have you worked for us before? No Yes If yes, when and where? _____

If hired, do you have a reliable means of transportation to get to work? _____

If hired, on what date will you be able to start work? _____

If part-time, what hours and days of the week would you be available for work? _____

List any friends or relatives working for us _____

Have you ever been discharged or asked to resign? No Yes If yes, explain in full _____

Have you ever been convicted of a felony, excluding traffic violations for which a fine of \$50.00 or less was imposed?

No Yes On probation No Yes If yes, explain in full _____

Have you ever been refused a bond by an employer? No Yes

Have there ever been shortages or misunderstandings about merchandise or funds at a place of employment which involved you?

No Yes If yes, explain in full _____

PERSONAL

MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces? No Yes If yes, what branch? _____

Dates of duty: From _____ To _____ Rank at discharge _____
 Month Day Year Month Day Year

List duties in the service including special training _____

Are you presently in the Armed Forces Reserve? No Yes

Active Inactive Branch _____

EDUCATION

Circle highest grade completed 5 6 7 8 9 10 11 12 College 1 2 3 4 5 6

HIGH SCHOOL COLLEGE: Give highest degree received

Name _____ Name _____

Address _____ Address _____

Last Year Attended _____ Graduated? No Yes Last Year Attended _____ Graduated? No Yes

Course of Study _____ Course of Study _____

Grades: Above Average Average Below Average Grades: Above Average Average Below Average

If not a high school graduate, do you have an equivalency diploma? No Yes

What special vocational or business courses have you taken? _____

JOB KNOWLEDGE/ABILITIES

Indicate below job skills you've acquired and equipment you can operate. Include time spent in each area (years, months, weeks)

Skills	How Much Time	Skills	How Much Time	Equipment	How Much Time	Equipment	How Much Time
Mechanical <input type="checkbox"/>		Customer Service <input type="checkbox"/>		Truck Driver Van <input type="checkbox"/>		Calculator <input type="checkbox"/>	
Electrical <input type="checkbox"/>		Dispatching <input type="checkbox"/>		Flatbed <input type="checkbox"/>		Drill Press <input type="checkbox"/>	
Building Construction <input type="checkbox"/>		Truck Maint. <input type="checkbox"/>		Forklift <input type="checkbox"/>		Arc Welder <input type="checkbox"/>	
Plumbing <input type="checkbox"/>		Security <input type="checkbox"/>		Cash Register <input type="checkbox"/>		Radial Arm Saw <input type="checkbox"/>	
Hardware <input type="checkbox"/>		Drafting <input type="checkbox"/>		Typewriter <input type="checkbox"/>		Component Saw <input type="checkbox"/>	
Cabinets <input type="checkbox"/>		Blueprint Reading <input type="checkbox"/>		Typesetting <input type="checkbox"/>		Other <input type="checkbox"/>	
Millwork <input type="checkbox"/>		Comm. Art <input type="checkbox"/>		Key Punch <input type="checkbox"/>			
Lumber Grading <input type="checkbox"/>		Book-keeping <input type="checkbox"/>		Computer <input type="checkbox"/>			
Bldg. Supply <input type="checkbox"/>		Other <input type="checkbox"/>		Word Processing <input type="checkbox"/>			
Sales <input type="checkbox"/>							

Do you have a valid chauffeur's license? No Yes Chauffeur's License Number _____

PRIOR WORK HISTORY

(List in order, last or present employer first) Employment record should include last 10 years. If a student or been retired within the past 10 years, please indicate.

Describe in detail the work you did: _____

PRIOR WORK HISTORY (CONTINUED)

Describe in detail the work you did:

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Describe in detail the work you did:

NOTE: Use additional sheets if necessary.

May we contact the employers listed above? No Yes If not, indicate below which one(s) you do not wish us to contact and why.

CHARACTER REFERENCES

Do not refer to mere acquaintances, previous employers or relatives. Refer to three people whom you know well either personally or in business.

NAME

ADDRESS

PHONE

NO. OF YEARS KNOWN

1.

2.

3.

TO THE APPLICANT

Are you 18 years old or over? No Yes (Employment is subject to verification that you are of minimum legal age.)

Are you a United States citizen No Yes If not a citizen of the U.S., can you provide proof that you can legally be employed in the United States? No Yes

What languages can you read, speak and write fluently? _____

IN CASE OF EMERGENCY NOTIFY:

Name _____ Relationship _____

Address _____ Phone _____
Street City State Zip

CERTIFICATION

I agree to undergo a character and credit investigation at Company expense and understand that this inquiry will include, but not be limited to, personal interviews with third parties, such as family members, business associates, financial and credit sources, etc.

Further, I hereby release my former employers and other character and credit sources from all liability or damages on account of having furnished information regarding my personal character, habits, work record, credit history, etc. I agree to take pre-employment drug examinations and other post-offer and post-employment examinations during the course of my employment. I understand the examinations will be at the expense of the company, and that they are a condition of employment. I understand and agree that my initial employment with this Company shall be probationary. I further understand that employment during the probationary period is in no way a guarantee of employment thereafter. Furthermore, I understand that if, following my probation, my employment is continued, the employment relationship is at will and may be terminated by either party at any time.

If accepted for employment, I hereby agree to abide by all rules and policies of the Company as explained in the Employee Handbook and its amendments from time to time, and to wear all personal protective equipment required for the occupation in which I am engaged. I agree to provide additional medical information which may be required or to take a medical or any other type of examination (at the expense of the Company) appropriate to my employment with the Company.

I fully understand that if I fail to answer, falsify the answer, or enter misleading answers to any question or fail to provide information which might make any of my answers on the application misleading, that this alone may result in a refusal to hire or in my termination if I am hired and I hereby agree that the Company shall not be liable in any respect if my employment is terminated or if I am not hired for this reason.

I HEREBY ACKNOWLEDGE that I have read and fully understand the above certification.

Date _____ Signature of Applicant _____

In the remaining space, briefly explain why you want to work for our company and why you would make a good employee:

All statements made by applicants for employment on this application form will be carefully checked for accuracy. The use of this form does not mean there are positions open and does not obligate us in any way. This application will remain on active file for a period of ____ Months from the date of application.

DO NOT WRITE BELOW THIS LINE

COMMENTS

It is advised that you consult with your attorney regarding this form and other aspects of your employment practices. By no means does FBMA state or warrant that this application form is in compliance with State or Federal laws, rules or regulations.