

Employment

Application

Position applying for: _____

Please complete this application in ink. INCOMPLETE or UNSIGNED applications will not be considered. We are an equal opportunity employer. If you need accommodation to participate in the hiring process please make note in the "additional information" section.

EMPLOYEE INFORMATION

Name: _____
Last First Middle

Telephone: () - E-mail: Alt. Phone: () -

Address: _____
Street City State Zip Code Social Security #:

Are you able to perform the essential functions of the position without special accommodations?

Yes No

Can you lift 50+ pounds? Yes No

Are you older than 18? Yes No

If no, Can you furnish a work permit?
 Yes No

Are you legally eligible for employment in the U.S.?
 Yes No

Are you seeking a permanent position?
 Yes No

Have you ever been employed by this company?
 Yes No

Are you currently employed? Yes No

If yes, May we contact your present employer?
 Yes No

If yes, Give name and phone # of contact: _____

Type of work desired: _____

Are you available / willing to work:
 Full-Time Part-Time Over-Time
Weekends? Saturday Sunday

I am available to report to work on, _____
Date

Do you have a valid driver's license? Yes No
License #: _____ Issuing State: _____ Class & Endorsements: _____

Have you ever been convicted of a felony? (Note: a "Yes" will not automatically eliminate you from consideration for employment.)
 Yes No ----- If yes, please explain: _____

Are you a Veteran of Military Service? Yes No

EMPLOYMENT HISTORY / WORK EXPERIENCE (List most recent first)

Employer Name & Address: _____ Supervisor's Name: _____

_____ Your Job Position: _____

Telephone #: () - Employed From: _____(mo/yr) To: _____(mo/yr)

Salary: Starting/Ending - _____ / _____ Duties: _____

What did you like most about your job? _____

Skills used / learned on the job? _____

Reason for leaving? _____

Employer Name & Address: _____

Supervisor's Name: _____

Your Job Position: _____

Telephone #: (____) _____ - _____

Employed From: _____ (mo/yr) To: _____ (mo/yr)

Salary: Starting/Ending - _____ / _____

Duties: _____

What did you like most about your job? _____

Skills used / learned on the job? _____

Reason for leaving? _____

Employer Name & Address: _____

Supervisor's Name: _____

Your Job Position: _____

Telephone #: (____) _____ - _____

Employed From: _____ (mo/yr) To: _____ (mo/yr)

Salary: Starting/Ending - _____ / _____

Duties: _____

What did you like most about your job? _____

Skills used / learned on the job? _____

Reason for leaving? _____

Employer Name & Address: _____

Supervisor's Name: _____

Your Job Position: _____

Telephone #: (____) _____ - _____

Employed From: _____ (mo/yr) To: _____ (mo/yr)

Salary: Starting/Ending - _____ / _____

Duties: _____

What did you like most about your job? _____

Skills used / learned on the job? _____

Reason for leaving? _____

EDUCATION / SCHOOL

Name of High School Diploma / GED? _____ Years Completed: _____

Post Secondary Degree? AA BA MA Major: _____ Minor: _____

SKILLS, QUALIFICATIONS & CONSIDERATIONS

Summarize special skills, honors, and qualifications or other activities relating to the job you are seeking, including supervision, volunteer work, languages or other skills you wish to bring to management's attention: _____

Types of computers, software and other electrical equipment you are qualified to operate: _____

Professional licenses, certifications or registrations: _____

REFERENCES

List least 3 (not relatives or previous supervisors) who are familiar with your qualifications, training and work history:

Name:	Address:	Occupation/Relationship:	Yrs Known:	Telephone:
_____	_____	_____	_____ () -	_____
_____	_____	_____	_____ () -	_____
_____	_____	_____	_____ () -	_____
_____	_____	_____	_____ () -	_____

CONTACT

In case of accident or illness, please contact: Name: _____ Daytime phone: () - _____
 Address: _____ Relationship: _____

ADDITIONAL INFORMATION (MAY BE HELPFUL TO QUALIFY FOR POSITION)

This section is intentionally blank for the applicant to use for any additional information that may be pertinent or help in the hiring process: _____

INFORMATION TO THE APPLICANT

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING. ONLY THOSE APPLICATIONS SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and supplementary materials i.e. a resume) are true, complete and without omissions. By signing below, I authorize **Hogman Lumber Inc.** to investigate all statements contained in this employment application. I understand any false information provided herein will likely result in a refusal to hire or immediate discharge if I become employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character, qualifications, or any other statements contained herein.

If hired, I will be responsible for familiarizing myself with all rules, regulations and policies of **Hogman Lumber Inc.** as they presently exist or are later modified. *If hired, I understand my employment can be terminated, at the discretion of **Hogman Lumber Inc.**, without notice, at any time and for any reason.*

I also understand that no representative of **Hogman Lumber Inc.** has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current written agreement signed by the President.

This company is an equal opportunity employer. All applicants will be considered without regard to age, race, national origin, religion, gender, physical or mental disability, or other protected classifications in accordance with applicable federal and state equal employment opportunity laws. This company will strive to accommodate any physical or mental limitations of employees or applicants in order to accomplish the essential functions of the job. I understand this application is not an offer of employment and no promises or representations of employment have been made to me at this time.

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. If necessary for employment, you may be required to supply your birth certificate, driver’s license, and other proof of authorization to work in the United States, have a physical examination and / or a drug test, or to sign a conflict of interest and non-compete agreement and abide by its terms.

I have read, understand and agree to the information shown above. I attest all my statements are true and correct.

Signature of Applicant	Date
Rev. 4/2016	Hogman Lumber Inc.
	Page 3 of 3