

Date Received: _____

-EMPLOYER'S USE-

DEPARTMENT _____

STARTING DATE _____ PAY _____



-EMPLOYER'S USE-

LOCATION _____

POSITION _____

**APPLICATION FOR
EMPLOYMENT
(Please answer all questions.)**

NOTICE: Applicant should read the following information before filling out any of the questions on this form. Title VII of the Civil Rights Act of 1964 as amended, prohibits discrimination in employment because of race, color, sex, religion, or national origin. It is also illegal to discriminate in employment of persons because of their age if over 40 or to discriminate on the basis of disability.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Signature of Applicant _____

Date _____

NAME

LAST

FIRST

MIDDLE

CURRENT ADDRESS _____

CITY/STATE/ZIP CODE _____

How long have you lived at your current address? _____ Telephone () _____
Years Months

If at the above residence less than 3 years, list below all residences for the past 3 years. Attach a separate sheet if necessary.

Street _____ City _____ State _____ Zip Code _____

Street _____ City _____ State _____ Zip Code _____
Position Applied For _____ Rate of Pay Expected _____

Are You Applying for: ☐ Full Time ☐ Part Time ☐ Temporary Referred By _____

Are you currently employed? ☐ Yes ☐ No If not, how long since leaving last employment? _____

EDUCATION

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

Last school attended _____
Name Address

GENERAL

Are you 18 years of age or older? ☐ Yes ☐ No If no, date of birth _____

Are you legally eligible for employment in the United States? ☐ Yes ☐ No

Have you ever been bonded? ☐ Yes ☐ No Name of bonding company _____

Have you ever been convicted of a felony? ☐ Yes ☐ No

If yes, please explain fully on a separate sheet of paper. Conviction of a crime is not an automatic bar to employment – all circumstances will be considered.

Check Kinds of Work in Which You Have Had Experience

_____ Accounting	_____ Data Processing
_____ Office Practices	_____ Bookkeeping
_____ Truck Driver	_____ Credit & Collections
_____ Building Material Purchasing	_____ Cashier
_____ Forklift Operator	_____ Warehouse
_____ Building Materials Sales-Inside	_____ Building Materials - Management
_____ Building Materials Sales-Outside	_____ Yard

List the office skills and/or plant and shop machines you are qualified to operate:

1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

EMPLOYMENT RECORD

*Please show employment for the past three years. Include any military service in the list.
Attach a separate page if needed.*

Current Employer: _____ Name of Current Supervisor: _____
Full Address: _____ Zip: _____ Phone: (____) _____
Position Held: _____ From: _____ to _____ Salary _____
month/year month/year
Reason for Leaving: _____

Company: _____ Name of Supervisor at Time of Separation: _____
Full Address: _____ Zip: _____ Phone: (____) _____
Position Held: _____ From: _____ to _____ Salary _____
month/year month/year
Reason for Leaving: _____

Company: _____ Name of Supervisor at Time of Separation: _____
Full Address: _____ Zip: _____ Phone: (____) _____
Position Held: _____ From: _____ to _____ Salary _____
month/year month/year
Reason for Leaving: _____

DRIVER EXPERIENCE AND QUALIFICATION

*Answer the questions on this section only if applying for driver position
.To be considered as a driver you must provide the information requested in this section.*

You have my permission to get a motor vehicle report for my driving record. ☐ Yes ☐ No
If no, go no further in completing this application.

Licenses

Driver's	State	License No.	Class	Endorsement(s)	Expiration Date
Licenses held in					
past 3 years					
must be shown.					

1. Have you ever been denied a license, permit or privilege to operate a motor vehicle? ☐ Yes ☐ No
2. Has any license, permit or privilege ever been suspended or revoked? ☐ Yes ☐ No
3. Have you ever been disqualified for violations of the Federal Motor Carrier Safety Regulations? ☐ Yes ☐ No

If you answered "YES" to any 1, 2, or 3 above, attach a statement giving details.

Driving Experience

Class of Equipment	Type of Equipment (Van, Tank, Flat, etc.)	Dates		Approximate Total Miles
		From	To	
Straight Truck				
Tractor and Semi Trailer				
Twin Trailers – LCV's				
Other				
Other				

Have you receive any awards or taken any courses or special training that would help you as a driver? If so, please describe. _____

Accident Review for Past Three (3) Years) (Attach separate sheet of paper if more space is needed.)

Dates (Begin with most recent)	Nature of Accident (Head-on, Rear-end, Overturn, etc.)	Fatalities	Injuries

Traffic Convictions and Forfeitures for the Past Three (3) Years Other than Parking Violations

Location	Date	Charge	Penalty

APPLICANT MUST READ AND SIGN

I certify that I have read and understood all of this employment application. I understand that the employer or its agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information.

It is also agreed and understood that under the Fair Credit Reporting Act, Public law 91-508, I have been told that this investigation may include an investigative Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

I also understand that misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to comply with and be bound by the safety and health rules and regulations and the rules and policies of the company.

DISCLAIMER

All employees of Berlin G. Myers Lumber Corp. are employed at-will and may quit or be terminated at any time and for any reason. Nothing in any of Berlin G. Myers Lumber Corp.'s rules, policies, handbooks, procedures or other documents relating to employment creates any express or implied contract of employment. No past practices or procedures, whether oral or written, form any express or implied agreement to continue such practices or procedures. No promises or assurances, whether written or oral, which are contrary to or inconsistent with the limitations set forth in this paragraph create any contract of employment unless: 1) the terms are put in writing; 2) the document is labeled "contract"; 3) the document states the duration of employment; and 4) the document is signed by Berlin G. Myers, President.

Date

Applicant Signature

.....
IN CASE OF EMERGENCY NOTIFY – (NAME, ADDRESS, PHONE)

.....
For employer's use.

Employers

1. _____
2. _____
3. _____
4. _____

Remarks: _____

REQUEST FOR CHECK OF DRIVING RECORD

I hereby authorize you to release the following information to

You are released from any and all liability that may result from furnishing such information.

(Applicant's/ Employee's Signature)

(Date)

The following named person (has made application/ is an employee) with our company and will be required to operate a company vehicle as part of their duties. Please furnish the undersigned with the applicant's/ employee's driving record for the past five years.

Name of Employee/ Applicant: _____

Address: _____

(Number & Street)

(City)

(State)

(Zip Code)

Former Address: _____

(City)

(State)

(Zip Code)

Date of Birth: _____

Social Security Number: _____

License Number Including State: _____

Requested By

(Name of Company)

(Address)

(City)

(State)

(Typed Name)

(Signature)