

Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. Interior Exterior Building Supply is an Equal Opportunity Employer. Applicants requiring reasonable accommodation to the application and/or interview process should notify the location where the interview will take place. Last Name First Name Middle Name Street Address Apt # City State Zip Telephone Number (s) with area code (s) E-Mail Address Position (s) Applied For: Date of Application How did you learn about us? Inquiry Advertisement Relative ☐ Employment Agency ☐ Friend Other ___ Have you been convicted of a misdemeanor or felony within the past 7 years? ☐ Yes □No If yes, please explain: A conviction will not necessarily disqualify you from consideration. ☐ Yes ☐ No Do you currently have misdemeanor and/or felony charges pending against you? If yes, please explain: This will not necessarily disqualify you from consideration. Are you 18 years of age or older? 7 Yes No If you are less than 18 years of age, can you provide required proof of your eligibility to ☐ Yes □No work? ☐ Yes Have you ever filed an application with us before? □ No If yes, give date: / / Have you ever been employed with us before? Yes No Do any of your friends or relatives work here? If yes, please name: Yes No Are you legally eligible for employment in the United States? ☐ Yes □ No Proof of eligibility will be required upon employment Can you travel if the job requires it? ☐ Yes No Date available to work What is your desired salary range? Full-Time Please indicate shift: 1 2 3 Are you available to work: ☐ Part-Time Please indicate preference: ☐ Morning ☐ Afternoon ☐ Evening Please indicate dates available: ☐ Temporary ____/___ to ____/___

FDUCATION

	Name of School	City/ State	Did You Graduate?	Years Completed	Course/Major/Degree
High School					
College					
Technical School					
Other Schools and/or Training					
If Diploma/Degree re	eceived under	different	: name, please	provide:	
					sional/trade memberships. , age, disability, & other
-					

EMPLOYMENT EXPERIENCE

Start with your present or last job. Please fill out all boxes completely						
Employer – current or last employer						
Address, including city & state						
Telephone Number(s) with area code(s)						
Job Title	Supervisor & Phone					
Dates Employed: From / / To / /	Hourly Rate/Salary Starting: Final:					
Contact Employer? Yes No Reason For Leaving:						
Employer – 2 nd previous employer						
Address, including city & state						
Telephone Number(s) with area code(s)						
Job Title	Supervisor & Phone					
Dates Employed: From / / To / /	Hourly Rate/Salary Starting: Final:					
	eason For Leaving:					
Employer – 3rd previous employer						
Address, including city & state						
Telephone Number(s) with area code(s)						
Job Title	Supervisor & Phone					
Dates Employed: From / / To / /	Hourly Rate/Salary Starting: Final:					
From / / To / / Starting: Final: Contact Employer? \[Yes \text{No} \text{Reason For Leaving:} \]						
Employer – 4 th previous employer						
Address, including city & state						
Telephone Number(s) with area code(s)						
Job Title	Supervisor & Phone					
Dates Employed: From / To / /	Hourly Rate/Salary Starting: Final:					
Contact Employer? Yes No Reason For Leaving:						

ADDITIONAL INFORMATION Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. Are you capable of performing in a reasonable manner, with or without accommodation, the activities involved in the job or occupation for which you have applied? \square Yes \square No A review of the activities involved in such a job or occupation has been given. Yes No **PROFESSIONAL REFERENCES** Relationship Telephone Number w/area code Name Company/Title Day - -Evening - -Cell ______ Company/Title Telephone Number w/area code Name Relationship

Relationship

Company/Title

Name

Evening - - - Cell - -

Telephone Number w/area code

Evening <u>- -</u>
Cell <u>- -</u>

APPLICANT'S STATEMENT

I certify that the information contained in this application is correct to the best of my knowledge. I understand that falsification of this information or material omission is grounds for termination of my possible employment at any time. I understand this job application is not an employment contract.

I understand the following:

My prior employers, educational institutions and other references listed on this application are authorized to give Interior/Exterior Building Supply any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise. I release all persons or entities from all liability for any damage that may result from furnishing information to Interior/Exterior Building Supply.

I understand that I will need to consent to a substance abuse test. I understand that any offer of employment will be contingent upon the results of a substance abuse test. I understand that any offer of employment will be contingent upon the results of a substance abuse test and may be contingent upon the results of a physical examination. The results of any such test and/or examination will be held in confidence. Prior to any such examination or test, I agree to release the results of the examination and/or test to Interior/Exterior Building Supply.

I must produce applicable documents showing that I am a United States citizen or alien lawfully authorized to work in the United States, with the time frame specified by Interior/Exterior Building Supply to meet the Immigration Reform and Control Act of 1986 requirements.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that if being hired for a DOT regulated position, the Company will investigate my former test results, other violations of DOT regulations, refusals to test, and any completion of return-to-duty requirements during the two years prior to the date of this application. I understand that if my former employers cannot supply this information, I will supply it

If Interior/Exterior Building Supply offers me employment and I accept the offer, I agree to conform to Interior/Exterior Building Supply's policies, rules and regulations. I understand and agree that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at-will" nature, which means my employment, benefits and compensation can terminate, with or without cause for any legal reason, and with or without cause, at any time, at my option or Interior/Exterior Building Supply's option. I further understand and agree that this at-will employment relationship as defined above will remain in effect throughout my employment with Interior/Exterior Building Supply. It is further understood that this "at-will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Interior/Exterior Building Supply. I certify that answers given herein are true and complete.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.								
Signature of Applicant	Date							

Voluntary Affirmative Action Information

Completion of information below is voluntary.

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status. As required, we comply with government regulations including Affirmative Action obligations where they apply. In an effort to comply with requirements regarding government record keeping, reporting and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is appreciated. Please be advised that your survey is <u>not</u> a part of your official application for employment. It is considered confidential information that will not be used in any hiring decision.

Date:	/	/	Position	n(s) applied for:		
Referral Source	ce:					
Advertise Employee Relative Walk-in School Governm Private En	ent Employm			f Source (if applicable):	:	
Applicants Na	me.				Telenhone:)
Applicants	FIRST		MIDDLE	LAST		
Address:						
	STREET			CITY	STATE	ZIP
Check one:	N	1ale _	Female			
Check one of	the following	Race/Eth	nic Groups:			
[[[[Hispanic/ Native Ha Two or N Unknown White	awaii/Paci Iore Races 1	fic Islander	IY OF THE FOLLOWING	ARE APPLICABLE:	
			LEAGE CHECK II AN		ANE ALL EIGHDEE.	
VIETN	AM ERA VET	ERAN		DISABLED VETERAN		HANDICAPPED INDIVIDUAL

SPECIAL NOTICE TO VIETNAM ERA VETERANS, DISABLED VETERANS AND INDIVIDUALS WITH PHYSICAL OR MENTAL HANDICAPS OR DISABILITIES
Government contractors subject to the Vietnam Era Veterans Readjustment Act of 1974 and the Rehabilitation Act of 1973 are required to take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and qualified handicapped individuals. You are invited to volunteer this information, if you qualify, to assist in proper placement and determining reasonable accommodation. This information will be considered confidential and refusal to provide this information will not adversely affect your consideration for employment.

To be completed by applicant – Not for interview purposes – To be filed separately from application. This information is used to satisfy the Affirmative Action requirements of Section 503 of the Rehabilitation Act or necessitated by another federal law or regulation.