

# **Application for Employment**

Would you object to such a procedure?

All applicants must successfully pass a drug screen and physical.			
Name:	Loct		
	Last		
Address: City		State	Zip Code
Cell # _( ) Home Phone # _( )	)	_Other:	
Email :			
Referred by: Are you over the	age of 18?	Yes	No
Position(s) applied for	Date avai	lable	
Type of employment desired Full-Time Part-Time	Summer		
Salary desired			
Are you legally eligible for employment in this country? Yes	No		
Languages: English Spanish Other			
Are you available to work overtime if required? Yes No			
Are you available to work weekends if required? Yes No			
Can you read a tape measure? Yes No			
Have you been employed at Koetter Woodworking, Inc. before?	Yes N	lo	
If yes, when? and at what location?			
As part of our company policy, it is standard procedure to perform someone we are considering for employment.	a criminal ba	ackground o	check on

Yes

No

#### **EDUCATIONAL BACKGROUND**

List previous three (3) educational institutions attended, beginning with the most recent.

			DEGREE(s)/DIPLOMA(s)
SCHOOL	CITY, ST	GRADUATED?	EARNED
		Yes No	
		Yes No	
		Yes No	
<b>COMMENTS</b> INCLUDING EXPLANATION	OF ANY GAPS IN E	EMPLOYMENT:	
Have you ever been convicted of a crime	e? Yes N	No	
•			
Have you ever been convicted of a crime If you checked yes then in what county a			
If you checked yes then in what county a	and state and what	t was your conviction?	Year
If you checked yes then in what county a County/State	and state and what	t was your conviction?	
If you checked yes then in what county a	and state and what	t was your conviction?	Year_ Year_
If you checked yes then in what county a County/State	and state and what	t was your conviction?	

#### **REFERENCES**

List the name, relationship, number of years acquainted, and phone number of three references. (No relatives please).

		YEARS	PHONE
NAME	RELATIONSHIP	ACQUAINTED	NUMBER
			( )
			( )
			( )
	!		

## EMPLOYMENT BACKGROUND

Provide the following information beginning with the most recent employer and temp agency.

EMPLOYER	TELEPHONE	DATES EMPLO	YED	SUMMARIZE THE TYPE OF WORK
	( )	FROM T	ГО	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS	, ,			
JOB TITLE		HOURLY		
		RATE/SALAR STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$ per		
REASON FOR LEAVING		HOURLY		
		RATE/SALAR FINAL	RY	
MAY WE CONTACT FOR REFERENCE?		\$ per		
Yes No Later		T Poi		
EMPLOYER	TELEPHONE	DATES EMPLO	VED	CUMMADIZE THE TYPE OF WORK
EMPLOTER	/ LEPHONE		TO	SUMMARIZE THE TYPE OF WORK
ADDRESS	( )	FROIVI	10	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS				
JOB TITLE		HOURLY		
JOB TITLE		RATE/SALAR		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$ per		
REASON FOR LEAVING		HOURLY RATE/SALAR	RY	
		FINAL		
MAY WE CONTACT FOR REFERENCE?		\$ per		
Yes No Later				
EMPLOYER	TELEPHONE	DATES EMPLO	YED	SUMMARIZE THE TYPE OF WORK
EMPLOYER	TELEPHONE ( )		TO	SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
	TELEPHONE			
EMPLOYER  ADDRESS	TELEPHONE ( )	FROM 1	ГО	
ADDRESS	TELEPHONE ( )	FROM 1	ГО	
	TELEPHONE ( )	FROM 1	TO	
ADDRESS  JOB TITLE	TELEPHONE ( )	FROM 1 HOURLY RATE/SALAR	TO	
ADDRESS	TELEPHONE ( )	FROM TO THE HOURLY RATE/SALAR STARTING	TO	
ADDRESS  JOB TITLE	TELEPHONE ( )	FROM TO THE PROPERTY OF THE PR	RY	
ADDRESS  JOB TITLE  IMMEDIATE SUPERVISOR AND TITLE	TELEPHONE ( )	FROM TO THE PROPERTY OF THE PR	RY	
ADDRESS  JOB TITLE  IMMEDIATE SUPERVISOR AND TITLE	TELEPHONE ( )	FROM TO THE HOURLY RATE/SALAR STARTING  \$ Per HOURLY RATE/SALAR	RY	
ADDRESS  JOB TITLE  IMMEDIATE SUPERVISOR AND TITLE  REASON FOR LEAVING	TELEPHONE ( )	HOURLY RATE/SALAR STARTING \$ per  HOURLY RATE/SALAR FINAL	RY	
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I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

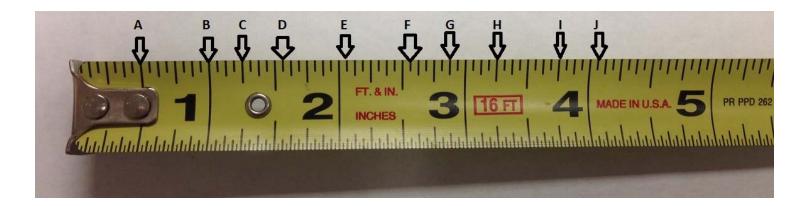
I understand that this application remains current for 1 Year. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal Immigration laws require me to complete an I-9 Form in this regard.

Applicant's Signature	Date
(not required when submitted via e-mail)	

### Tape Measure / Measurement Effectiveness Study



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