



MERRICK HARDWOODS

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.

PLEASE PRINT

Position(s) Applied For		Date of Application		
How did you learn about us?				
<input type="radio"/> Advertisement		<input type="radio"/> Employment Agency		<input type="radio"/> Relative
<input type="radio"/> Other _____		<input type="radio"/> Friend		
<input type="radio"/> Inquiry				
Last Name	First Name	Middle Name		
Address		City	State	Zip
Phone Number(s)		Social Security Number		



GENERAL INFORMATION

Best time to contact you is:		____:____ am pm	
If you are under 18 years of age, can you provide required proof of your eligibility to work?		Yes	No
Have you ever filed an application with us before?	If Yes, give date	Yes	No

Have you ever been employed with us before?	If Yes, give date	Yes	No

Do any of your friends or relatives, other than spouse, work here?		Yes	No
Are you currently employed?		Yes	No
May we contact your present employer?		Yes	No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <small>Proof of citizenship or immigration status will be required upon employment.</small>		Yes	No

Date available for work:	____/____/____	What is your desired salary range?	\$ _____		
Are you available to work:	Full-Time	Please Indicate Shift			
		1	2	3	
	Part-Time	Please Indicate			
		Morning	Afternoon	Evening	
	Temporary	Please Indicate Dates Available			
____/____/____ - ____/____/____					

Are you currently on "lay-off" status and subject to recall?	Yes	No
Can you travel if a job requires it?	Yes	No
Have you been convicted of a felony within the last five years? <small>A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.</small>	Yes	No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER



EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Phone Number		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
Reason for Leaving					

2	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Phone Number		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
Reason for Leaving					



3	Employer		Dates Employed		Work Performed
			From	To	
	Address				_____
	Phone Number		Hourly Rate/Salary		_____
			Starting	Final	_____
Job Title		Supervisor		_____	
Reason for Leaving				_____	

4	Employer		Dates Employed		Work Performed
			From	To	
	Address				_____
	Phone Number		Hourly Rate/Salary		_____
			Starting	Final	_____
Job Title		Supervisor		_____	
Reason for Leaving				_____	

5	Employer		Dates Employed		Work Performed
			From	To	
	Address				_____
	Phone Number		Hourly Rate/Salary		_____
			Starting	Final	_____
Job Title		Supervisor		_____	
Reason for Leaving				_____	



List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

ADDITIONAL INFORMATION

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills (Check Skills/Equipment Operated)

		Production/Mobile Machinery (list)	Other (list)
<input type="radio"/> Terminal	<input type="radio"/> Spreadsheet		
<input type="radio"/> PC/Mac	<input type="radio"/> Word processing		
<input type="radio"/> Typing	<input type="radio"/> Shorthand		
WORDS PER MINUTE <input type="text"/>	WORDS PER MINUTE <input type="text"/>		

State any additional information you feel may be helpful to us in considering your application.



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 a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

Yes

No

References

1	Name:	Phone:
	Address:	
2	Name:	Phone:
	Address:	
3	Name:	Phone:
	Address:	

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

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

This application for employment shall be considered active for a period of time not to exceed one (1) year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. 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 this organization.

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