

Employment Application



We are an equal opportunity employer.
Each question should be fully and accurately answered.
Please print, except for your signature on the back of the application. This application will remain active for 30-days.

Today's Date: _____

Personal Data

First Name _____ Middle _____ Last _____

Street Address _____

City _____ State _____ Zip _____

Main phone # _____ Secondary phone # _____

Are you at least 18 years of age? _____ Email Address _____

Are you legally authorized to work in the United States? _____

Do you have any commitments which would cause you to miss work, please let us know so that we can schedule accordingly. Remember, attendance is important factor in the evaluation process.

What shift are you able to work? _____ First _____ Second _____ Split

Are you able to work overtime? _____ Are you able to work Saturdays? _____

Education

Name of High School/College/University	Years Completed	Field of Study	Graduate/Degree

Please list any specialized program that you have completed such as an apprenticeship or other training program

Are you in school or planning to attend school? _____

Military History

Are you a Military Veteran? _____ Active Reservist? _____ Area of Specialty? _____

Employment Experience

Name of Current or Last Employer _____

Street Address _____ City _____ State _____ Zip _____

Dates of employment: From _____ To: _____ Job Title: _____

Position: _____ Ending wage: _____

Duties and Responsibilities: _____

Reason for leaving: _____

Immediate Supervisor: _____ May we check references: _____

Name of Previous Employer _____

Street Address _____ City _____ State _____ Zip _____

Dates of employment: From _____ To: _____ Job Title: _____

Position: _____ Ending wage: _____

Duties and Responsibilities: _____

Reason for leaving: _____

Immediate Supervisor: _____ May we check references: _____

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Street Address _____ City _____ State _____ Zip _____

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Position: _____ Ending wage: _____

Duties and Responsibilities: _____

Reason for leaving: _____

Immediate Supervisor: _____ May we check references: _____

Work Preferences

Position Desired: _____ Second Choice _____

Salary Requirement: _____ per _____ Date available to start: _____

Employment Preferences: ___ Full Time ___ Part Time ___ Temporary ___ Summer Only
(Check all that apply)

Additional Information

Have you previously worked for Cabinet Components & Distribution or Bayer Interior Woods? _____

List any special talents, license, certificates, skills, or software experience

References (names should be professional relationships)

Name: _____ Relationship _____ Phone# _____

Street Address _____ City _____ State _____ Zip _____

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Street Address _____ City _____ State _____ Zip _____

Name: _____ Relationship _____ Phone# _____

Street Address _____ City _____ State _____ Zip _____

Applicant Agreement

I acknowledge that the information I have supplied is correct to the best of my knowledge and understand that any deliberate falsifications, misrepresentation or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment. I hereby authorize the Company to make whatever investigation it deems necessary to verify or check on the information above. Bayer Interior Woods (a.k.a. Cabinet Components) reserves the right to conduct a criminal background check after employment is offered or accepted.

I understand that if hired, my employment is at-will and may be terminated with or without cause, with or without notice, at any time, by the Company or me. I also understand that while personnel policies, programs procedures and benefits may change from time to time, such at-will status is not subject to change.

Today's Date _____ Your Signature _____