

HOLMES DRYWALL SUPPLY, INC.

APPLICATION FOR EMPLOYMENT

PLEASE PRINT

POSITION APPLYING FOR: _____ DATE: ____/____/____

NAME: _____
LAST FIRST MIDDLE

ADDRESS: _____
STREET CITY STATE ZIP CODE

TELEPHONE #: _____ SOCIAL SECURITY #: _____

IF YOU ARE UNDER 18, CAN YOU FURNISH A WORK PERMIT?..... YES NO CIRCLE ONE

HAVE YOU EVER BEEN EMPLOYED HERE BEFORE?..... YES NO

ARE YOU ELIGIBLE FOR EMPLOYMENT IN THIS COUNTRY?..... YES NO
(PROOF OF US CITIZENSHIP OR I.N.S. STATUS IS REQUIRED)

DATE AVAILABLE FOR WORK..... YES NO

TYPE OF EMPLOYMENT DESIRED.....FULL TIME.....PART TIME....TEMPORARY.....SEASONAL.....EDUCATION CO-OP

ARE YOU ABLE TO MEET ATTENDANCE REQUIREMENTS OF THE JOB?..... YES NO

HAVE YOU BEEN CONVICTED OF A FELONY IN THE LAST 7 YEARS?..... YES NO
(CONVICTION DOES NOT AUTOMATICALLY BAR YOU FROM EMPLOYMENT)

IF YES, PLEASE EXPLAIN: _____

DRIVER'S LICENSE #: _____ STATE: _____

EMPLOYMENT HISTORY

LIST YOUR LAST 3 EMPLOYERS, OR VOLUNTARY ACTIVITIES (AT LEAST 5 YEARS), STARTING WITH THE MOST RECENT, INCLUDING MILITARY EXPERIENCE.

FROM:	TO:	EMPLOYER:	PHONE:
JOB TITLE:		ADDRESS:	
SUPERVISOR/TITLE:		NATURE OF WORK/JOB RESPONSIBILITIES	
HOURLY RATE/SALARY	START	FINISH	REASON FOR LEAVING:

FROM:	TO:	EMPLOYER:	PHONE:
JOB TITLE:		ADDRESS:	
SUPERVISOR/TITLE:		NATURE OF WORK/JOB RESPONSIBILITIES	
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FROM:	TO:	EMPLOYER:	PHONE:
JOB TITLE:		ADDRESS:	
SUPERVISOR/TITLE:		NATURE OF WORK/JOB RESPONSIBILITIES	
HOURLY RATE/SALARY	START	FINISH	REASON FOR LEAVING:

SKILLS & QUALIFICATIONS

SUMMARIZE SPECIAL SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCES THAT MAY QUALIFY YOU TO WORK WITH OUR COMPANY.

EDUCATIONAL BACKGROUND

SCHOOL NAME/LOCATION	YEARS COMPLETED	DID YOU GRADUATE?	COURSE OF STUDY
HIGH SCHOOL			
COLLEGE		MAJOR/DEGREE	
TRADE/TECHNICAL SCHOOL			

REFERENCES

NAME & ADDRESS	TELEPHONE #	YEARS KNOWN
	() -	
	() -	
	() -	
	() -	

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the Employer’s service if I have been employed.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information, and all other persons, corporations or organizations for furnishing such information.

The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant’s consideration for employment on a basis prohibited by local, state, or federal law.

I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

By completing and submitting this application for employment, I understand and agree that *Holmes Drywall Supply, Inc.* (the “Company”), has a *Dispute Resolution Plan*, which is incorporated by reference in this application. This Plan is the required and exclusive way for applicants, Employees and the Company to resolve any and all disputes. I agree to resolve any dispute between the Company and me arising out of this application or, if the Company hires me, out of my employment, through the Dispute Resolution Plan, which includes binding arbitration as a final step.

SIGNATURE OF APPLICANT

DATE