

APPLICATION FOR EMPLOYMENT

Tiffin
Huron
Findlay
Maumee
Fremont
Oak Harbor
Port Clinton
Bowling Green



Genoa
Lindsey
Bellevue
Truss Div.
Concrete Div.
Insulation Div.
Design Gallery
Modular Home Div.

GENERAL OFFICES:
1515 CROGHAN STREET, FREMONT, OHIO 43420
PH: (419) 333-5444 FAX: (419) 333-5445 www.gordonlumber.com

Position (s) Applied for _____ Today's Date ____/____/____

Referral Source _____ Advertisement _____ Friend _____ Relative _____ Other

Name _____

Address _____

Phone Number ____ - ____ - ____ SSN ____ - ____ - ____

Are you at least 18 years old? _____ yes _____ no

Have you filed an application here before? _____ yes _____ no Date ____/____/____

Have you ever been employed here before? _____ yes _____ no Date ____/____/____

Are you a citizen of the United States? _____ yes _____ no

If not, do you possess an Alien Registration Card? _____ yes _____ no

If yes, give Alien Registration Number _____

Are you available to work? _____ Full Time _____ Part Time _____ Other

Date you can start ____/____/____ Can you travel if job requires it? _____ yes _____ no

Are you currently laid off and subject to recall? _____ yes _____ no

Do any of your friends or relatives other than your spouse, work here? _____ yes _____ no

If yes, list name (s) _____

Have you ever been convicted, or pleaded no contest to a crime? _____ yes _____ no

If yes, explain _____

Drivers License Number _____ State _____

Any moving violations? _____ yes _____ no If yes, explain _____

In an Emergency, whom should we contact? _____

Phone Number ____ - ____ - ____

List each job previously held. Start with your present or last job. Include military service assignments and volunteer activities. (Exclude Groups which indicate race, color, religion, sex, or national origin.)

1. Employer _____
Date employed: From ____ / ____ / ____ ____ / ____ / ____
Address _____
Pay at start date _____ Current or last pay _____
Supervisor _____
Reason for leaving _____

2. Employer _____
Date employed: From ____ / ____ / ____ ____ / ____ / ____
Address _____
Pay at start date _____ Current or last pay _____
Supervisor _____
Reason for leaving _____

3. Employer _____
Date employed: From ____ / ____ / ____ ____ / ____ / ____
Address _____
Pay at start date _____ Current or last pay _____
Supervisor _____
Reason for leaving _____

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I authorize you to make such investigations and inquires of my personal, employment, financial, or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquires in connection with my application. I understand that I am required to abide by all rules and regulations of the Company as permitted by law.

Date ____ / ____ / ____ Applicant's Signature _____
