



Employment Application

"An Equal Opportunity Employer"

Note: A Physical Examination and Drug Test May Be Required as a Condition of Employment.

Last Name: _____ First: _____ Middle Initial: _____

Present Address: _____ Telephone: _____

City: _____ State: _____ Zip: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

Position Applied For: _____ Date Available: _____

Salary Expected: _____ Hours Available: _____

Work Desired Full Time Part Time Temporary Seasonal

Are you Under 18 Yes No

Education History	Name & Location	Degree/Years Completed
High School	_____	_____
University/College	_____	_____
Other/Honors	_____	_____

List Any Office Equipment or Machinery You Can Operate _____

Answer The Following If Applying For A Position Requiring Operation Of A Vehicle:
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Check Type of Vehicles You Are Qualified To Operate Passenger Light Truck Heavy Truck _____ Class

Drivers License Number: _____ Class: _____ State: _____ Expires: _____

Drivers License Ever Revoked or Suspended Yes No If Yes, Give Details _____

List All Moving Violations Within The Last 3 Years _____

Employment History (most current first) Include Relevant U.S. Military Service

Employer: _____ Job Title: _____

Address: _____ Duties: _____

Supervisor: _____ Phone: _____

May We Contact: _____ Reason For Leaving: _____

Employed From: mo. _____ year _____ To: mo. _____ year _____ Beginning Salary: _____ Ending Salary: _____

Employer: _____ Job Title: _____
Address: _____ Duties: _____
Supervisor: _____ Phone: _____
May We Contact: _____ Reason For Leaving: _____
Employed From: mo. ___ year ___ To: mo. ___ year ___ Beginning Salary: _____ Ending Salary: _____

Employer: _____ Job Title: _____
Address: _____ Duties: _____
Supervisor: _____ Phone: _____
May We Contact: _____ Reason For Leaving: _____
Employed From: mo. ___ year ___ To: mo. ___ year ___ Beginning Salary: _____ Ending Salary: _____

Pre-Employment Drug Testing

I understand that one of the requirements for employment at Industrial Lumber & Plywood, Inc. may be a urine screen for drugs. I further understand that failure to consent to this urine drug screen will be considered withdrawal of my application for employment. I also understand that if the test discloses the presence of any one or more of the tested drugs, I will be denied employment at Industrial Lumber & Plywood, Inc.

I authorize the laboratory utilized by Industrial Lumber & Plywood, Inc., physician(s) to release the results of this drug screen to the authorized representative of Industrial Lumber & Plywood, Inc. and understand that the results and findings of the drug screen will not be released by the company to any person or agency unless compelled to do so by judicial process in the case of law enforcement officials.

Date: _____ Signature (in ink): _____

I hereby authorize Industrial Lumber & Plywood, Inc. to make inquiries not limited to but including previous employers, schools, and investigative or credit agencies. I understand that I have the right to request information about the nature and scope of any such investigation.

I agree to take a physical examination, if requested, by a company approved doctor at the expense of the company and understand that such examination may include tests for use of illegal drugs. I further authorize those physicians to release the results of any such tests to Industrial Lumber & Plywood, Inc., its agencies and employees.

By signing this application, I affirm that all statements herein, (and in my resume; if any) are TRUE, and misrepresentation of facts will subject me to immediate termination.

"I understand that if I am employed, I may terminate the employment relationship at any time and Industrial Lumber & Plywood, Inc. may terminate the employment relationship at any time, without notice or cause. I understand that practices and statements set out in policies, handbooks and other company literature may be changed at any time by Industrial Lumber & Plywood, Inc. without notice, and that such practices and statements do not create an employment contract. I further understand that if an offer of employment is made, I will be required to submit documentation which will verify that I am a citizen or national of the United States, and alien lawfully admitted for permanent residence or an alien authorized to be employed in the United States."

Date: _____ Signature (in ink): _____

FOR OFFICE USE ONLY

Location: _____ Interviewer: _____ Date: _____

Comments: _____

Accepted

Not Accepted