



# Employment Application

The information given on this form is solely for the use of Lodge Lumber and will be held in the strictest confidence. It will be to the applicant's advantage to answer each question fully and accurately. The use of this form does not indicate that there are any positions open and does not obligate the Facility in any way.

Date

**Please Print**

<b>Personal</b>	Last Name	First	Middle	Email Address
	Present Address- Street	City, State	Zip Code	Contact Telephone Number
	Alternate Address- Street	City, State	Zip Code	Alternate Telephone Number
	Referred by:	Date Available for Employment	Eligible to Work in United States? Yes                      No	
	Position (s) Applied For:	Starting Salary Desired	Geographical Locations Preferred	
	Are you willing to: Travel?    Yes    No	Work Overtime?    Yes    No	Transfer?    Yes    No	
	Are you at least 18 years of age? Yes            No	Have you previously worked for our Facility? Yes            No		

**Must be completed in its entirety, including salary information.**

<b>Employment Background</b>	<b>1. Present (or last) Company Name</b>			
	Address	City, State	Phone #	
	Dates: From - To	Starting Base Salary \$	Current Base Salary \$	May we contact? Yes    No
	Job Title	Supervisor	Reason for Leaving	
	Brief description of duties (include number of persons supervised, if applicable)			
	<b>2. Previous Employer Company Name</b>			
	Address	City, State	Phone #	
	Dates: From - To	Starting Base Salary \$	Ending Base Salary \$	
	Job Title	Supervisor	Reason for Leaving	
	Brief description of duties (include number of persons supervised, if applicable)			
	<b>3. Previous Employer Company Name</b>			
	Address	City, State	Phone #	
	Dates: From - To	Starting Base Salary \$	Ending Base Salary \$	
Job Title	Supervisor	Reason for Leaving		
Brief description of duties (include number of persons supervised, if applicable)				

**Lodge Lumber IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE AGAINST APPLICANTS OR EMPLOYEES ON THE BASIS OF RACE, COLOR, SEX, AGE, RELIGION, NATIONAL ORIGIN, GENETIC INFORMATION OR DISABILITY.**

<b>Education</b>	Schools Attended and Location	Indicate Last Year Completed 1, 2, 3, 4	Type of Degree*	Grade Avg	Major
	High School		Diploma or GED Yes No		
	College				
	College				
	College				
	Special Awards or Recognitions			* If no degree obtained, indicate number of college credit hours completed	

<b>Military</b>	Active Duty Branch	Dates of Active Duty	Highest Rank Attained
	Reserve Status	Reserve Branch	

<b>Skills/Licenses</b>	List office skills, trades, abilities or license certifications that may be beneficial in the job for which you are applying.		
	Foreign Languages:	Degree of Proficiency: Speak      Read      Write	

**List three professional references most familiar with your abilities (supervisors preferred).**

<b>References</b>	Name and Association	Occupation	Address	Phone Number	Years Known
	Name and Association	Occupation	Address	Phone Number	Years Known
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**APPLICANT'S STATEMENT** (Applicant must review and sign below.)

I certify that answers given herein are true and complete to the best of my knowledge. I authorize the Company to investigate all statements in this application and to secure any necessary information from all my employers, references and academic institutions. I authorize the Company to investigate my background and as a result I will be requested to complete an Authorization to Obtain Consumer and Investigative Consumer Report form. I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my background check, MVR, academic credentials, and employment references. I further understand that any false information, misleading statements or omission of facts will be sufficient cause for rejection of my application if the Company has not employed me and for immediate dismissal if the Company has employed me.

In the event of my employment with the Company, I will comply with all rules, regulations, and policies set forth in the Company's policy manual or other communications distributed by the Company. Further, I understand that I must immediately notify the Company if I am convicted of, receive deferred adjudication in, or otherwise plead guilty or no contest to any criminal offense, while my application is pending or during my tenure as an employee.

I understand that nothing in this employment application, in the Company's policy statements or personnel guidelines, or in my communications with any Company official is intended to create an employment contract between the Company and me or for providing any benefit. I also understand that the Company has the right to modify any of its policies at any time without giving notice of the changes to me. No promises of employment have been made to me. I acknowledge that in the event of my employment, it is for no definite period of time, and may regardless of the date of payment of my salary, be terminated at any time with the customary notice as prescribed by law either by myself or by the Company without necessity on the part of either for showing special cause for termination.

I hereby acknowledge that I have read and understand the preceding statements.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_