

STENERSON LUMBER

Application for Employment

We are an Equal Opportunity Employer. Applicants are considered for all positions and employees are treated during employment, without regard to race, color, religion, sex, national origin, age, disability, marital status or any other prohibited basis of discrimination as provided under federal and state laws. We are obligated by the Americans with Disabilities Act to provide reasonable accommodation to the known disabilities of applicants and employees, unless doing so would pose an undue hardship. Feel free to let us know if you need an accommodation to complete the application process or to perform any essential elements of the position sought. This application shall be considered active for 60 days from today's date.

(Please Print Clearly)

Name (Last)	(First)	(M.I.)	Phone Number: ()	Application Date:
Present Address	City	State	Zip Code	Since:
Previous Address	City	State	Zip Code	From: To:
Previous Address	City	State	Zip Code	From: To:
Type of Work Desired:				Full Time _____ Part Time _____ Temporary _____
Have you ever been employed with this Company or its subsidiaries? If so, when?				
List Any Friends or Relatives Working for Us.				
If Hired, When Will You Be Available To Start Work?			If Hired, Do you Have A Reliable Means Of Transportation To Get To Work?	

Educational Record

High School	Name:	City and State:
College or University	Name:	City and State:
College or University	Name:	City and State:
College Work	Courses of Study:	Degrees Received:
Apprentice, Business Vocational School	Name:	City and State: Course of Study:
List Any Special Skills You Have:		
List any Hobbies and Activities:		
Have You Ever Attended School, Been Employed, Or Carried A Credit Card in a Name Other Than The Name In Which You Are Applying For Employment? Yes _____ No _____		
School:	Employment:	Credit Account:
How did you find out about this position or who were you referred by?		

Prior Work History (List In Order, Last Or Present Employer to First)

Dates		Name and Address of Employer	Rate of Pay		Supervisors Name and Title	Reason for Leaving
From	To		Start	Finish		
Position Held						
Describe In Detail The Work You Did.						

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From	To		Start	Finish		
Position Held						
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From	To		Start	Finish		
Position Held						
Describe In Detail The Work You Did.						

List The Name, Address, and Phone Number of Three References:

1.
2.
3.

**PLEASE READ CAREFULLY
APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for immediate dismissal. The companies, schools, and persons named on this application may give information of my personal history and financial and credit records, through investigative or credit agencies of your choice. If employed, I further authorize you to check my credit record, as needed, on a continuing basis. I agree that if I am hired, my employment is "at will" and for no definite period of time, I may be terminated, with or without cause or notice, at any time, for any reason by the Company. I understand that no representative of the Company has the authority to enter into any employment agreement contrary to the foregoing, except an officer of the Company done so in writing. If I am employed, I understand and agree that when my employment is terminated by retirement or otherwise, I must return all of the Company's property entrusted to me.

Date: _____ Signature of Applicant _____

*NOTE: The Provisions of the Fair Credit Reporting Act will be applicable if a credit report on the applicant is obtained and considered.