

## BOEHM-MADISEN LUMBER COMPANY EMPLOYMENT APPLICATION



BOEHM-MADISEN IS AN EQUAL OPPORTUNITY EMPLOYER. EMPLOYMENT OFFERS ARE MADE ON THE BASIS OF QUALIFICATIONS AND WITHOUT REGARD TO RACE, SEX, RELIGION, NATIONAL ORIGIN, DISABILITY, AGE, VETERAN STATUS, GENETIC INFORMATION, ARREST AND CONVICITON RECORD, SEXUAL ORIENTATION, OR ANY OTHER PROTECTED BASIS UNDER FEDERAL, STATE OR LOCAL LAWS.

APPLICATION INFORMATION - PLEASE READ AND COMPLETE CAREFULLY.

POSITION	ON APPLYING FOR:									
DATE AVAILABLE FOR EMPLOYMENT:										
TYPE C	F WORK: PART-TIME	FU	LL-TIME S	SUBSTITUTE		OTHER				
LAST N	IAME:		FIRST NAME:			MIDDLE N	AME:			
HAVE \	YOU EVER USED ANOTHER NAME	? PLE	ASE LIST:							
WHAT	DAYS ARE YOU AVAILABLE FOR W			SDAY		NESDAY		URSDAY		
SALAR	Y YOU WOULD EXPECT:			FRIDAY S.	ΑI	TURDAY	SUN	DAY	HC	LIDAYS
PRESENT STREET ADDRESS: CITY:								STATE:	ZIP:	
FNESEI	VI SINEEI ADDNESS.			CITT.				SIAIL.	ZIF.	
MAILIN	NG ADDRESS - IF DIFFERENT THAN	I ABO	VE:	CITY:				STATE:	ZIP:	
HOME	PHONE:	CEL	L PHONE:	EMAIL:						
							1			
1.	ARE YOU ABLE TO PERFORM THE	ESSE	NTIAL FUNCTIONS OF 1	THE POSITION FOR V	۸ŀ	HICH YOU		YES		NO
	ARE APPLYING WITH OR WITHOU	T AN	A REASONABLE ACCO	MMODATION?						
2.	ARE YOU LEGALLY AUTHORIZED 1	o wo	ORK IN THE U.S.?					YES		NO
3. ARE YOU 18 YEARS OF AGE OR OLDER?							YES		NO	
										-
4. IF REQUIRED FOR THE POSITION, DO YOU HAVE A VALID DRIVER'S LICENSE?							YES		NO	
IF YES, STATE OF ISSUANCE, LICENSE #, AND EXPIRATION DATE:										
	DIFACE LIST DESTRUCTIONS //F AN	\/\								
	PLEASE LIST RESTRICTIONS (IF AN Interstate:	Y ):								
	Intrastate:			<del></del>						
	Air Brakes:									
	Other:									
								YES		NO
5. DO YOU HAVE ANY CRIMINAL CHARGES PENDING AGAINST YOU OR WERE YOU EVER CONVICTED OF ANY CRIME ANYWHERE, INCLUDING IN FEDERAL, STATE, LOCAL, MILITARY										
	AND TRIBAL COURTS? IF YES, CO		•							
							1			

SECTION A: PLEASE LIST CONVICTIONS AND PENDING CHARGES, INCLUDING DATES. IN THE CASE OF A CONVICTION, PLEASE PROVIDE A BRIEF DESCRIPTION OF THE CIRCUMSTANCES. YOU MAY ATTACH ADDITIONAL PAGES IS NECESSARY.

PENDING CHARGES NOT REPORTED WILL BE CONSIDERED AN ACT OF DISHONESTY AND WILL RESULT IN THE

ADDITIONAL PAGES IF NECESSARY.								
YOUR NAME AT TIME	DATE	COURT LOCATION	CONVICTION/PENDING	COURT	CIRCUMSTANCES OF			
OF OFFENSE	(MO/YR)	(CITY/STATE)	CHARGE	DISPOSITION	THE CONVICTION			
IN ACCORDANCE WITH F								
WILL NOT BE CONSIDER								
CONVICTION ARE SLIBST	İ							

## **EDUCATION**

DISQUALIFICATION OF YOUR APPLICATION.

NAME OF SCHOOL	CITY/STATE	DID YOU	DEGREE	MAJOR	G.P.A.
		GRADUATE?	RECEIVED		
HIGH SCHOOL/GED:		YES NO			
TRADE SCHOOL:		YES NO			
COLLEGE:		YES NO			

DESCRIBE ANY OTHER TRAINING OR SPECIAL COURSES YOU COMPLETED THAT YOU CONSIDER RELEVANT TO THE POSITION FOR WHICH YOU ARE APPLYING:

## **EMPLOYMENT EXPERIENCE**

> INCLUDE MILITARY SERVICE. ATTACH ADDITIONAL SHEETS IF NECESSARY AND PLEASE EXPLAIN ANY GAPS IN EMPLOYMENT.

DATES EMPLOYED (MOST RECENT POSITION)	TITLE:	FULL TIME PART-TIME
FROM: TO:		IF PART-TIME, # HRS./WK:
ORGANIZATION NAME:	SUPERVISOR:	SUPERVISOR'S TITLE:
REASON FOR LEAVING:		
DATES EMPLOYED	TITLE:	FULL TIME PART-TIME
FROM: TO:		IF PART-TIME, # HRS./WK:
ORGANIZATION NAME:	SUPERVISOR:	SUPERVISOR'S TITLE:

DATES EMPLOYED		TITLE:	FULL TIME	PART-TIME
FROM: TO:			IF PART-TIME, # H	RS./WK:
ORGANIZATION NAME:		SUPERVISOR:	SUPERVISOR'S TIT	LE:
REASON FOR LEAVING:			,	
HAVE YOU EVER BEEN FIRED FRO	M A JOB? IF SO, PI	LEASE DESCRIBE THE REAS	ON:	
TYPING SKILLS: Do you type?	Yes No	Words per minute	2:	
PLEASE DESCRIBE COMPUTER AN	ID WORD PROCESSI	NG SKILLS:		
IF YOU ARE AN EXPERIENCED OPI RELATED SKILLS, PLEASE LIST:	ERATOR OF ANY OT	HER OFFICE AND/OR PLA	NT MACHINERY OR EQUIPMENT	, OR HAVE OTHER JOB-
REFERENCES				
> ATTACH ADDITIONAL SHI	EETS IF NECESSARY	AND PLEASE EXPLAIN ANY	GAPS IN EMPLOYMENT.	
	EETS IF NECESSARY		GAPS IN EMPLOYMENT.  RELATIONSHIP	PHONE
> ATTACH ADDITIONAL SHI			<del>_</del>	PHONE
> ATTACH ADDITIONAL SHI			<del>_</del>	PHONE
ATTACH ADDITIONAL SHI			<del>_</del>	PHONE
NAME			<del>_</del>	PHONE
NAME  PERSONAL STATEMENT	COMPA	.NY	<del>_</del>	

> USE THIS SPACE AND AN ADDITIONAL SHEET IF NECESSARY FOR EXPLANATIONS ABOUT ANSWERS GIVEN ABOVE OR OTHER

INFORMATION THAT YOU BELIEVE WOULD BE BENEFICIAL TO YOUR APPLICATION.

## CERTIFICATION STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

- The information provided by me in this Employment Application is true and correct. I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that if hired, I am required to abide by all rules and regulations of the Employer.
- I authorize investigation of all statements contained in this application for employment as may be necessary in
  arriving at an employment decision, including the performance of a background check on all information provided
  by me on this Application, including but not limited to information related to criminal charges, past crimination
  convictions, and education and employment history.
- This application for employment shall be considered active for a period of time not to exceed 180 days. Any
  applicant wishing to be considered for employment beyond this time period should inquire as to whether or not
  applications are being accepted at that time.
- I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.
- I understand that any offer of employment will be conditioned upon successfully completing a drug and alcohol examination and that I may be required to undergo a hearing examination, if applicable to my position.

APPLICANT SIGNATURE: <sub>.</sub>	 	 
DATE:		