



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 CONVICTION RECORD, SEXUAL ORIENTATION, OR ANY OTHER PROTECTED BASIS UNDER FEDERAL, STATE OR LOCAL LAWS.

APPLICATION INFORMATION – PLEASE READ AND COMPLETE CAREFULLY.

LAST NAME:		FIRST:		MIDDLE:	
HAVE YOU EVER USED ANOTHER NAME? PLEASE LIST:					
PRESENT STREET ADDRESS:			CITY:	STATE:	ZIP:
MAILING ADDRESS – IF DIFFERENT THAN ABOVE:			CITY:	STATE:	ZIP:
HOME PHONE:		CELL PHONE:		EMAIL:	
POSITION APPLYING FOR:					
DATE AVAILABLE FOR EMPLOYMENT:					
TYPE OF WORK: <input type="checkbox"/> PART-TIME <input type="checkbox"/> FULL-TIME <input type="checkbox"/> SUBSTITUTE <input type="checkbox"/> OTHER					
WHAT DAYS ARE YOU AVAILABLE FOR WORK? (CHECK ALL THAT APPLY)					
		<input type="checkbox"/> MONDAY	<input type="checkbox"/> TUESDAY	<input type="checkbox"/> WEDNESDAY	<input type="checkbox"/> THURSDAY
		<input type="checkbox"/> FRIDAY	<input type="checkbox"/> SATURDAY	<input type="checkbox"/> SUNDAY	<input type="checkbox"/> HOLIDAYS
SALARY YOU WOULD EXPECT:					
1. ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION FOR WHICH YOU ARE APPLYING WITH OR WITHOUT A REASONABLE ACCOMMODATION? 2. ARE YOU LEGALLY AUTHORIZED TO WORK IN THE U.S.? 3. ARE YOU AT LEAST 18 YEARS OF AGE OR OLDER? 4. IF REQUIRED FOR THE POSITION, DO YOU HAVE A VALID DRIVER'S LICENSE? IF YES, STATE OF ISSUANCE, LICENSE #, AND EXPIRATION DATE: _____ PLEASE LIST RESTRICTIONS (IF ANY) INTERSTATE: _____ INTRASTATE: _____ AIR BRAKES: _____ OTHER: _____				<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> 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, COMPLETE SECTION A BELOW.				<input type="checkbox"/> YES <input type="checkbox"/> NO	

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 IF NECESSARY.

YOUR NAME AT TIME OF OFFENSE	DATE (MO/YR)	COURT LOCATION (CITY/STATE)	CONVICTION/PENDING CHARGE	COURT DISPOSITION	CIRCUMSTANCES OF THE CONVICTION

IN ACCORDANCE WITH FEDERAL, STATE AND LOCAL LAW, PENDING CRIMINAL CHARGES OR ANY CONVICTION WILL NOT BE CONSIDERED OR DISQUALIFY YOU FROM EMPLOYMENT UNLESS THE CIRCUMSTANCES OF THE CONVICTION ARE SUBSTANTIALLY RELATED TO THE PARTICULAR JOB YOU ARE SEEKING. CONVICTIONS AND PENDING CHARGES NOT REPORTED, OR REPORTED INACCURATELY, WILL BE CONSIDERED AN ACT OF DISHONESTY AND WILL RESULT IN THE DISQUALIFICATION OF YOUR APPLICATION, OR IF LEARNED ABOUT AFTER HIRE DATE MAY RESULT IN TERMINATION OF EMPLOYMENT.

EDUCATION

NAME OF SCHOOL	CITY/STATE	DID YOU GRADUATE	DEGREE RECEIVED	MAJOR	G.P.A.
HIGH SCHOOL/GED:		<input type="checkbox"/> YES <input type="checkbox"/> NO			
TRADE SCHOOL:		<input type="checkbox"/> YES <input type="checkbox"/> NO			
COLLEGE:		<input type="checkbox"/> YES <input type="checkbox"/> 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) FROM: TO:	TITLE:	<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART-TIME IF PART-TIME, # HRS/WK MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO
ORGANIZATION NAME:	SUPERVISOR:	SUPERVISOR'S TITLE:
REASON FOR LEAVING:		

DATES EMPLOYED FROM: TO:	TITLE:	<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART-TIME IF PART-TIME, # HRS/WK MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO
ORGANIZATION NAME:	SUPERVISOR:	SUPERVISOR'S TITLE:
REASON FOR LEAVING:		
DATES EMPLOYED FROM: TO:	TITLE:	<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART-TIME IF PART-TIME, # HRS/WK MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO
ORGANIZATION NAME:	SUPERVISOR:	SUPERVISOR'S TITLE:
REASON FOR LEAVING:		

HAVE YOU EVER BEEN FIRED FROM A JOB? IF SO, PLEASE DESCRIBE THE REASON _____

TYPING SKILLS: DO YOU TYPE YES NO WORDS PER MINUTE: _____

PLEASE DESCRIBE COMPUTER AND WORD PROCESSING SKILLS: _____

IF YOU ARE AN EXPERIENCED OPERATOR OF ANY OTHER OFFICE AND/OR PLANT MACHINERY OR EQUIPMENT, OR HAVE OTHER JOB-RELATED SKILLS, PLEASE LIST:

PERSONAL REFERENCES – If you list a personal reference below, you authorize Boehm-Madisen to contact them for verification purposes.

NAME	COMPANY	RELATIONSHIP	PHONE

PERSONAL STATEMENT

➤ PLEASE LIST THE JOB SKILLS YOU HAVE THAT WOULD ENABLE YOU TO PERFORM EFFECTIVELY IN THE POSITION FOR WHICH YOU ARE APPLYING

➤ 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), or omitted from my application or interview(s), may result in me not being hired and/or being discharged.
- 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 or contract, 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: _____

DATE: _____