



Zachary Lumber & Hardware is an Equal Opportunity Employer. All persons offered employment in the classified service are required to submit to and pass a pre-employment drug test as a condition of employment and is liable for expense. An applicant who refuses to submit to or fails a pre-employment drug test, interferes with a test procedure, or tampers with a test sample, will be removed from applicant pool and will be disqualified from employment with Zachary Lumber & Hardware. After 30 days of employment, hired employee will be reimbursed for drug test amount if receipt provided.

APPLICANT NAME (LAST, FIRST, MI)	SOCIAL SECURITY NO.	CONTACT NO.	DRIVER'S LICENSE NO.
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ADDRESS	EMAIL ADDRESS
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POSITION APPLYING FOR: <input type="checkbox"/> DRIVER <input type="checkbox"/> YARD <input type="checkbox"/> SALESPERSON <input type="checkbox"/> ADMINISTRATIVE <input type="checkbox"/> MANAGEMENT	DAYS AVAILABLE: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> T <input type="checkbox"/> F <input type="checkbox"/> S	<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME
<input type="checkbox"/> HIGH SCHOOL GRADUATE/GED <input type="checkbox"/> ASSOCIATE'S DEGREE <input type="checkbox"/> BACHELOR'S DEGREE <input type="checkbox"/> OTHER	LIST LICENSES, REGISTRATIONS, &/OR CERTIFICATES BELOW. INCLUDE LIC./CERT. NO., ISSUING AGENCY, ISSUE DATE, EXPIRE DATE.	<input type="checkbox"/> I AM 18 YEARS OF AGE OR OLDER <input type="checkbox"/> I AM A CITIZEN OF THE UNITED STATES <input type="checkbox"/> I AM AN ALIEN AUTHORIZED TO WORK IN US <input type="checkbox"/> I HAVE BEEN CONVICTED OF FELONY CHARGES*
<input type="checkbox"/> I HAVE BEEN DISCHARGED FROM PREVIOUS EMPLOYMENT*		

LIST BELOW YOUR WORK EXPERIENCE, STARTING WITH THE MOST RECENT EMPLOYMENT. PROVIDE A DETAILED DESCRIPTION OF REGULARLY ASSIGNED DUTIES FOR EACH JOB.

PREVIOUS EMPLOYER	JOB TITLE	ADDRESS	TELEPHONE NO..
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SUPERVISOR	DATES EMPLOYED	RATE OF PAY	WORK HOURS	<input type="checkbox"/> RESIGNED <input type="checkbox"/> FIRED <input type="checkbox"/> LAID-OFF
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JOB DUTIES

REASON FOR LEAVING

PREVIOUS EMPLOYER	JOB TITLE	ADDRESS	TELEPHONE NO..
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SUPERVISOR	DATES EMPLOYED	RATE OF PAY	WORK HOURS	<input type="checkbox"/> RESIGNED <input type="checkbox"/> FIRED <input type="checkbox"/> LAID-OFF
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SUPERVISOR	DATES EMPLOYED	RATE OF PAY	WORK HOURS	<input type="checkbox"/> RESIGNED <input type="checkbox"/> FIRED <input type="checkbox"/> LAID-OFF
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JOB DUTIES

REASON FOR LEAVING

CERTIFICATION: BY SIGNING AND SUBMITTING THIS FORM AND ANY ATTACHMENTS, I CERTIFY THAT THIS APPLICATION IS COMPLETE AND ALL INFORMATION PROVIDED IS TRUE AND ACCURATE AND CONTAINS NO WILLFUL FALSIFICATIONS OR MISREPRESENTATIONS. I UNDERSTAND THAT FALSIFICATIONS, MISREPRESENTATIONS, OR OMISSIONS MAY DISQUALIFY ME FROM CONSIDERATION FOR EMPLOYMENT WITH ZACHARY LUMBER & HARDWARE OR IF HIRED, MAY BE GROUNDS FOR TERMINATION. I HEREBY AUTHORIZE THIS EMPLOYER TO (1) CONTACT CURRENT AND PREVIOUS EMPLOYERS FOR VERIFICATION OF EMPLOYMENT, (2) CONDUCT A BACKGROUND INVESTIGATION, (3) CHECK MY DRIVING RECORD. I UNDERSTAND THAT I MAY BE FINGERPRINTED IF HIRED.

SIGNATURE: _____

DATE: _____

* FOR EXTRA SPACE &/OR ANY EXPLANATIONS, WRITE ON BACK OF APPLICATION