# APPLICATION FOR EMPLOYMENT

Please answer all questions. If one does not apply, insert N/A (not applicable).

**PERSONAL**

Date Completed: _____

Name _____ Last Four Digits of Social Security Number: _____
(Please print) Last First M.I.

Home Phone: ( ) _____

Cell Phone: ( ) _____

*Current* Address _____ _____ _____ _____
Street City State Zip

***If less than 5 years, list prior address:***

_____ _____ _____ _____
Street City State Zip

***Email address*:** _____ **Referral Source:** _____

Position desired: 1) _____

2) _____

Date Available to Start: _____

Type of employment desired:

- ❒ FULL-TIME
- ❒ PART-TIME
- ❒ SUMMER

Can you work overtime, if needed?

❒ YES ❒ NO

Can you work evenings, weekends and holidays?

❒ YES ❒ NO

Do you have the legal right to work in the U.S.? ❒ YES ❒ NO

Have you, since the age of 18, ever been convicted of a felony? ❒ YES ❒ NO If yes, describe briefly: _____

_____

***Please note: A conviction record will not necessarily be a bar to employment.***

I have previously: ❒ Applied for employment with JELD-WEN® or one of its subsidiaries.

❒ Been employed by JELD-WEN® or one of its subsidiaries.

Position: _____ Date: _____

Location: _____

Names of friends or relatives at this company:

_____

_____

_____

| **EDUCATION** Name / City / State | No. of Years | Degree/Diploma (If degree, identify type) |
|---|---|---|
| High School | | |
| College | | |
| Business, Trade, or Other | | |

Are you presently enrolled as a student? ❒ YES ❒ NO If yes, where? _____

Please list any other special training, skills (including computer skills), hobbies, and experience which will help you with our Company.

_____

_____

**EMPLOYMENT RECORD --** Beginning with your present or most recent employer, list the last three jobs you have held.

| | | |
|---|---|---|
| NAME OF EMPLOYER (Present or Last) | JOB TITLE | BASE RATE OF PAY (Hourly/Weekly/Monthly)<br>START END |
| (ADDRESS) (CITY) (STATE) | | AREA CODE PHONE<br>( ) |
| DATES EMPLOYED<br>From: To: | NAME & TITLE OF SUPERVISOR | REASON FOR LEAVING |
| BRIEF DESCRIPTION OF DUTIES: | | |
| If still employed, may we contact this employer? ❒ YES ❒ NO | | |

| | | |
|---|---|---|
| NAME OF EMPLOYER | JOB TITLE | BASE RATE OF PAY (Hourly/Weekly/Monthly)<br>START END |
| (ADDRESS) (CITY) (STATE) | | AREA CODE PHONE<br>( ) |
| DATES EMPLOYED<br>From: To: | NAME & TITLE OF SUPERVISOR | REASON FOR LEAVING |
| BRIEF DESCRIPTION OF DUTIES: | | |
| If still employed, may we contact this employer? ❒ YES ❒ NO | | |

| | | |
|---|---|---|
| NAME OF EMPLOYER | JOB TITLE | BASE RATE OF PAY (Hourly/Weekly/Monthly)<br>START END |
| (ADDRESS) (CITY) (STATE) | | AREA CODE PHONE<br>( ) |
| DATES EMPLOYED<br>From: To: | NAME & TITLE OF SUPERVISOR | REASON FOR LEAVING |
| BRIEF DESCRIPTION OF DUTIES: | | |
| If still employed, may we contact this employer? ❒ YES ❒ NO | | |

**REFERENCES --** List people (in addition to your prior employers) we may contact for additional information regarding your capabilities and work habits.

| **Name** | **Address** | **(City)** | **(State)** | **(Zip)** | **Area Code** | **Number** |
|---|---|---|---|---|---|---|
| | | | | | ( ) | |
| | | | | | ( ) | |

**CERTIFICATION & AGREEMENT** — Read Carefully and Sign

**Please read the following statements carefully before signing this application. Only those applications that are completely filled out, signed and dated are considered valid.**

**I certify that all answers or statements I have made in this application or other supplementary material are true and correct without omissions. I acknowledge that any false statement, misrepresentation or material omission on this application or supplementary materials may result in a refusal to hire, or an immediate dismissal if I am hired. I authorize you to contact any of my past employers, schools and personal references concerning my previous employment, education and personal history. I release this company and all persons and organizations so contacted from all claims and liabilities of any nature arising from such investigations or the supplying of such information. I understand that I will be required, and hereby agree, to submit to a drug and alcohol screening and may be required to undergo a fitness for duty exam as part of the hiring process. If hired, I agree to comply with all rules and policies established from time to time by the company. I understand that, if hired, my employment is for no definite period of time and may be terminated at any time by the company or by me, with or without cause. *Nothing in this application, or in any oral or written statement provided by the company to me, will limit the rights to terminate my employment at will, and no one will have authority to change the at-will relationship orally or in writing.* I have read and understand the foregoing statements and accept the same as conditions of employment.**

**Signature of Applicant** _____ **Date** _____