



# APPLICATION for EMPLOYMENT

Thank you for your interest in applying for a job with our company. Because of our commitment to excellence, we are only interested in hiring the best applicants. We want to have a complete understanding of your qualifications, motivations, and interests, so that we can make careful and deliberate hiring decisions that will benefit both the company and our employees. Please answer the following questions honestly, completely, and thoughtfully.

Providing false/incorrect information is the basis for termination or disqualification from the hiring process.

We are an Equal Opportunity Employer and do not discriminate on the basis of race, color, religion, sex, national origin, age, marital status, veteran status, handicap/disability, ancestry, or any other protected class.

## PERSONAL INFORMATION

Email Address: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_(\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_ Cell Phone: \_(\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Do you have, or have you applied for, the legal right to remain permanently and work in the United States? Yes\_\_ No\_\_

Can you provide proof of age? Yes \_\_ No \_\_ (If you apply for a position that requires you to operate machinery, you must be 18 years of age or older)

Have you ever been convicted of a crime other than minor traffic violations? Yes\_\_ No\_\_ If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

## YOUR JOB INTERESTS

Position Applied For: \_\_\_\_\_ Date you can start work: \_\_\_\_/\_\_\_\_/\_\_\_\_

Starting wage/salary expected: \$\_\_\_\_/hr. or \$\_\_\_\_/yr.

Circle what type of work you are available for: Full-time Part-time Seasonal

Are there days of the week you would not be available to work (please list them)? \_\_\_\_\_

How did you learn of this job opening? \_\_\_\_\_

Have you ever worked for Yoder Lumber Co., Inc.? Yes\_\_ No\_\_ If yes, When: \_\_\_\_\_

Why did you leave? \_\_\_\_\_

Do you know anyone who works here? Yes\_\_ No\_\_ If yes, Who: \_\_\_\_\_

## EDUCATION & TRAINING

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College/Trade/Tech School: 1 2 3 4 5 6

Name of the last school you attended: \_\_\_\_\_

# YOUR WORK EXPERIENCE

**Beginning with your present or most recent employer, describe your employment experiences:**

Are you presently employed? Yes\_\_ No\_\_      Are you on layoff and subject to recall? Yes\_\_ No\_\_

**1. Present or Last Employer:** \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

Start Date of Employment: \_\_/\_\_/\_\_\_\_ End Date of Employment: \_\_/\_\_/\_\_\_\_

Starting Position: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Description of your work and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Will you receive a satisfactory reference from this employer? Yes\_\_ No\_\_

If yes, please explain: \_\_\_\_\_

May we contact your present employer at this time? Yes\_\_ No\_\_

If no, please explain: \_\_\_\_\_

**2. Next Previous Employer:** \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

Start Date of Employment: \_\_/\_\_/\_\_\_\_ End Date of Employment: \_\_/\_\_/\_\_\_\_

Starting Position: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Description of your work and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Will you receive a satisfactory reference from this employer? Yes\_\_ No\_\_

If yes, please explain: \_\_\_\_\_

May we contact your present employer at this time? Yes\_\_ No\_\_

If no, please explain: \_\_\_\_\_

**3. Next Previous Employer:** \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

Start Date of Employment: \_\_/\_\_/\_\_\_\_ End Date of Employment: \_\_/\_\_/\_\_\_\_

Starting Position: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Description of your work and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Will you receive a satisfactory reference from this employer? Yes\_\_ No\_\_

If yes, please explain: \_\_\_\_\_

May we contact your present employer at this time? Yes\_\_ No\_\_

If no, please explain: \_\_\_\_\_

**4. Next Previous Employer:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

**ONLY COMPLETE THIS SECTION IF THE JOB YOU ARE APPLYING FOR MIGHT REQUIRE YOU TO DRIVE COMPANY VEHICLES**

Do you have a valid driver's license? Yes\_\_ No\_\_

License Number: \_\_\_\_\_ State: \_\_\_\_\_ Endorsements: \_\_\_\_\_

Have you had any accidents in the last 5 years? Yes\_\_ No\_\_

If yes, please provide details: \_\_\_\_\_

Have you been cited for any moving violations in the last 5 years? Yes\_\_ No\_\_

If yes, please provide details: \_\_\_\_\_

Has your driver's license ever been suspended, revoked, denied, or cancelled? Yes\_\_ No\_\_

If yes, please explain: \_\_\_\_\_

**YOUR MILITARY EXPERIENCE**

Have you ever been in the United States Armed Services? Yes \_\_ No\_\_

If yes, what branch? \_\_\_\_\_

Describe any skills you acquired in the service which would be useful to the job for which you are applying:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OTHER QUALIFICATIONS & EXPERIENCE**

List past courses/training/extra curricular activities/certifications that will help you in this position:

\_\_\_\_\_

List special equipment/technical materials you can work with: \_\_\_\_\_

\_\_\_\_\_

List other experiences that may help with your work for this company: \_\_\_\_\_

\_\_\_\_\_

**YOUR REFERENCES**

List the names of any professional or personal character references who have known you for the last three years or more. Please do not list relatives:

1. Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Relationship: \_\_\_\_\_ City, State: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

2. Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Relationship: \_\_\_\_\_ City, State: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

3. Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Relationship: \_\_\_\_\_ City, State: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

**PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY**

By signing below, I certify that I have read, understand and agree to each of the following statements:

All of the information I have supplied on this application is true, accurate and complete, to the best of my knowledge. I have not knowingly withheld any information, which if known to the company, would affect my application unfavorably. If I am hired by the company, and it is discovered at any time during my employment that any of the statements or answers on this application are false, misleading, or incomplete, I may be dismissed immediately from my job.

This employment application will be considered active for six months from the date below. If I want to be considered for a job with the company after this period of time, I must fill out another application.

I agree to submit to a medical examination which may include testing for drugs or alcohol prior to beginning work with the company. I understand that if I am employed by the company, I may be required, when job related and consistent with the company's business needs, to undergo a medical examination or testing for alcohol or other drugs.

In consideration of my employment with the company, I agree to abide by all the company's rules and regulations.

I understand that nothing in this employment application creates a contract of employment between me and the company. If I am hired by the company, my employment and compensation are "at will", which means that my employment can be terminated either by the company or me, with or without cause, and with or without notice.

I agree to release to the company or its designated agents all medical information, including but not limited to files, reports, x-rays, evaluations, and opinions held by medical personnel, to the extent such information is job-related, and consistent with the company's business needs. I acknowledge that this is a general release and that if hired, it remains in effect for the duration of my employment.

In the event of my personal indebtedness to the company, I authorize the company to withhold from my wages such amounts as permitted by law to satisfy my obligation to the company.

I give the company my permission to conduct any investigation regarding the information contained in my employment application, which the company thinks is necessary to determine my qualifications for assuming a job with the company. I give the company permission to contact any former employer, school, college or university, utility company, credit or finance bureau or office, any personal or professional reference, or any other appropriate source or individual for the purpose of gathering any information, personal or otherwise, that such sources may have about my character, general reputation, credit, education, or employment record, and give my consent to any such source to release to the company whatever information they have about me. I also unconditionally release all named and unnamed sources from any and all liability which might result from furnishing any information about me.

Date: \_\_\_/\_\_\_/\_\_\_\_\_ Signature: \_\_\_\_\_

**How to submit this application**

*In Person, at any Yoder Lumber Co., Inc. Office **OR** By Mail, 4515 Township Road 367 Millersburg, OH 44654*

**Questions? Contact HR at 330-893-3121**

**OFFICE USE ONLY**

Hire Date: \_\_\_/\_\_\_/\_\_\_\_\_

Start Date: \_\_\_/\_\_\_/\_\_\_\_\_

Location: \_\_\_\_\_

Department: \_\_\_\_\_

Position: \_\_\_\_\_

Salary/Hourly Rate: \_\_\_\_\_

Van Route: \_\_\_\_\_