

Application For Employment

Builders' Glass is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected class.

Last Name	FirstName	Middle Initial	Social Security Number
Address	City	Zip Code	Phone Number

WORK EXPERIENCE - LIST MOST RECENT JOB FIRST

From	Employer's Name/Address/Telephone	Start Pay	Job Title
To		Last Pay	Reason for Leaving

Describe the Work You Did

From	Employer's Name/Address/Telephone	Start Pay	Job Title
To		Last Pay	Reason for Leaving

Describe the Work You Did

From	Employer's Name/Address/Telephone	Start Pay	Job Title
To		Last Pay	Reason for Leaving

Describe the Work You Did

GENERAL INFORMATION

What position are you applying for? _____ Full Time? [] Part Time? []

When are you available to start work? _____ Are you willing to work overtime? Yes [] No []

Are you at least 18 years old? Yes [] No []

If not, can you provide a valid Work Permit, high school diploma, or equivalent? Yes [] No []

How did you find out about this job? _____

If hired, can you verify that you have the legal right to work in the United States? Yes [] No []

Do you have any special skills, training, or experience which may help you qualify for this job? Yes [] No []

If so, please explain _____

Do you have a reliable means of transportation to get to work? Yes [] No []

Are there any times during the week that you are not available to work? Yes [] No []

If so, please explain _____

Do any of your relatives work for this company? Yes [] No [] If so, who? _____

Have you ever worked for this company before? Yes [] No [] If so, when? _____

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses? Yes [] No []

(NOTE: Conviction will not necessarily disqualify applicant) If so, please explain _____

Can you pass a Motor Vehicle check, allowing you to operate company vehicles? Yes [] No []

BUSINESS REFERENCES – List at least 2

Name/Title	Company Name/Phone #	Company City/State
Name	Company Name/Phone #	Company City/State
Name	Company Name/Phone #	Company City/State

CERTIFICATION AND ACKNOWLEDGMENT

I certify that the information provided herein is true and correct to the best of my knowledge. I understand that, if employed, falsified statements on this Application for Employment form will be considered grounds for termination.

I authorize the company to thoroughly investigate my work experience and any other matters related to my suitability for employment. I further authorize my former employers to disclose to the company any and all information they may have concerning my previous employment. In addition, I hereby release the company, my former employers, and all other persons from any and all claims, demands, or liabilities arising out of, or in any way related to, such disclosure.

I acknowledge that, if employed, both the company and I have the right to terminate the employment relationship at any time, with or without cause or advance notice. This employment at will relationship will remain in effect throughout my employment with the company and may not be modified by any oral or implied agreement.

Applicant's Signature

Date