



Channel Lumber Company  
 100 West Cutting Blvd  
 Richmond, CA 94804

# Application for Employment

Equal access to programs, services and employment is available to all persons. Applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department

Name \_\_\_\_\_ Date of Application \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Social Security Number \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Referral source (How did you hear about us?) \_\_\_\_\_

If you are under 18, can you furnish a work permit? .....  Yes  No

If **no**, please explain \_\_\_\_\_

Have you even been employed here? .....  Yes  No

If **yes**, give dates and positions \_\_\_\_\_

Are you legally eligible for employment in this country? .....  Yes  No

Date available for work \_\_\_\_\_ What is your desired salary range? \$ \_\_\_\_\_

Type of employment desired  Full Time  Part Time  Temporary  Seasonal  Educational Co-Op

Driver's License number if driving may be required in position for which you are applying \_\_\_\_\_

Answering 'yes' to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pled 'guilty' or 'no contest' to, or been convicted of a crime? .....  Yes  No

If **yes**, please provide date(s) and details \_\_\_\_\_

## Employment History

Starting with you most recent employer, provide the following information.

Employer	Telephone #	Date employed:
Address	Compensation (Starting) \$ _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Salaried
Starting Job Title/Final Job Title	Commission /Bonus/Other Compensation \$ _____	
Immediate Supervisor and title	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Compensation (Final) \$ _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salaried
Why did you leave?	Commission /Bonus/Other Compensation \$ _____	
Summarize the type of work performed and job responsibilities		
What did you like most about your position?		
What were the things you liked least about the position?		

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Summarize the type of work performed and job responsibilities		
What did you like most about your position?		
What were the things you liked least about the position?		

## **Skills and Qualifications**

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

Computer Skills (Check appropriate boxes, Include software title and years of experience.)

Word Processing \_\_\_\_\_ Years \_\_\_\_\_  E-mail \_\_\_\_\_ Years \_\_\_\_\_  
 Spreadsheet \_\_\_\_\_ Years \_\_\_\_\_  Internet \_\_\_\_\_ Years \_\_\_\_\_  
 Presentation \_\_\_\_\_ Years \_\_\_\_\_  Other \_\_\_\_\_ Years \_\_\_\_\_

Please list all languages that you speak \_\_\_\_\_

## **Educational Background**

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years completed	Completed <input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____	Major/Minor
School (include City & State)	Years completed	Completed <input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____	Major/Minor
School (include City & State)	Years completed	Completed <input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____	Major/Minor

## **References**

List name and telephone number of three business/work references who are NOT related to you and are NOT previous supervisors.

If not applicable, list three school or personal references who are NOT related to you.

Name	Title	Relationship to You	Telephone	Number of years known

## **Applicant Statement**

- I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.
- I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employer, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organization for furnishing such information about me.
- I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.
- I understand that this application remains current for 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.
- If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurance to the contrary and that no implied oral or written agreements contrary to the foregoing express language or valid unless they are in writing and signed by the employer's president.
- I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.
- I understand that I will be screened for illegal drug and alcohol use. I may also be required to take a physical exam to determine my physical capability for the job(s) I am applying for.
- I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (a) eliminate me from further consideration for employment, or (b) may result in my immediate discharge from the employer's service, whenever it is discovered

**Do not sign until you have read the above applicant statement. I certify that I have read, fully understand and accept all terms of the items above**

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_