EOE Statement

We are an Equal Opportunity Employer. We will consider applicants for this position without regard to any category protected by applicable federal, state or local law, including but not limited to: race, color, religion, sex, national origin, age, physical or mental disability, genetic information, veteran status or uniformed servicemember status.

If hired, I understand my employment is at-will as permitted under applicable state law. I understand this means that either the company or I may terminate the employment relationship at any time, for any reason, with or without notice or cause.

Personal Information

Candidate:		Date Created:	
		Date of Application:	
Position:		Application Method:	
Location:		Referral Source:	
Main Phone:		Alternate Phone:	
Address:			
Email Address:			

Core Questions

Please enter the name of the specific source where you learned about this position:

Why are you interested in this position?

Are you at least 18 years of age?

Do you have a valid driver's license?

Do you have previous experience installing garage doors or experience in a related field? i.e. HVAC, Windows/Door replacment etc..

Are you comfortable climbing ladders with a height of 6-10 feet?

Can you provide work authorization?

Do you have previous experience using power tools?

Education

Institution:		Institution Type:	
Location:		Start Date:	
Degree:			

D&D Garage Doors Inc

Education continued...

Major:	
Notes:	

Employment History

Employer:			
Phone:			
Job Title:			
Duties:			
Reason for Leaving:			
Dates of Employment:	*From:*	*To:*	
Supervisor:			
May we contact?			
Employer:			
Phone:			
Job Title:			
Duties:			
Reason for Leaving:			
Dates of Employment:	*From:*	*To:*	
Supervisor:			
May we contact?			
Employer:			
Phone:			
Job Title:			
Duties:			
Reason for Leaving:			
Dates of Employment:	*From:*	*To:*	
Supervisor:			
May we contact?			

US Military Experience

Branch of Service:			
Rank at Discharge:		Years in Service:	
Highest Rank Attained:		Are you currently in the reserves?	
Additional Information:			

Skills Experience

Skill:					
Last Used:		Skill Level:		Years of Experience:	
Skill Summary:					

Skill:					
Last Used:		Skill Level:		Years of Experience:	
Skill Summary:					

Skill:					
Last Used:		Skill Level:		Years of Experience:	
Skill Summary:					

Licenses and Certifications

Certification Type:		Registration Number:	
Geographic Area:		Certification Date:	
Additional:			

Certification Type:		Registration Number:	
Geographic Area:		Certification Date:	
Additional:			

Certification Type:		Registration Number:	
Geographic Area:		Certification Date:	
Additional:			

Work Schedule

Day	Hours Available for Work

Additional Information

Please read carefully before signing

I certify that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be true, complete and accurate, to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from further consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal, regardless of when such information is discovered.

The Company considers this Application for Employment to be a part of the personnel record.

THIS COMPANY IS AN AT-WILL EMPLOYER WHERE ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. I UNDERSTAND THAT NO COMPANY EMPLOYEE OR REPRESENTATIVE HAS THE AUTHORITY TO ENTER INTO A CONTRACT REGARDING DURATION OF TERMS AND CONDITIONS OF EMPLOYMENT OTHER THAN THE PRESIDENT/CEO OF THE COMPANY AND THEN ONLY BY MEANS OF A WRITTEN CONTRACT SIGNED BY THE PRESIDENT/CEO.

I authorize the Company and/or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking, to the extent permitted by federal, state, or local law. Federal law and some states require a separate disclosure and consent when obtaining background reports from a consumer reporting agency. I understand I will be asked to complete any requisite consent forms for the background check which may be required by federal, state and/or local law. I agree to sign these forms and understand that my offer of employment may be conditional upon the background check.

I AUTHORIZE AND CONSENT TO, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY THIS EMPLOYER (INCLUDING ANY AND ALL PRIOR EMPLOYERS OF MINE) TO FURNISH INFORMATION REGARDING MY PREVIOUS EMPLOYMENT HISTORY AND/OR ANY OF THE ABOVE-MENTIONED INFORMATION. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by the Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company as required by the Immigration Reform and Control Act of 1986. I also understand this Company employs only individuals who are legally eligible to work in the United States.

Print Name:

eSignature: Date: