

EMPLOYMENT APPLICATION
THE GLASS SHOP

An Equal Opportunity Employer

Date of Application_____

Name_____

| | | |
|------|-------|--------|
| Last | First | Middle |
|------|-------|--------|

Address_____

| | | | |
|--------|------|-------|-----|
| Street | City | State | Zip |
|--------|------|-------|-----|

Home Telephone_____ Years at Present Address_____

| | | |
|--------------------|-----------------|-------------------|
| Driver's License # | Expiration Date | Social Security # |
|--------------------|-----------------|-------------------|

Position applying for_____

1. What are your wage expectations? Hourly \$ _____

2. Is there any reason why you would be unable to fully and safely perform all duties of the Position for which you are applying? Yes_____ No_____

If Yes, please explain _____

3. If under 18 years of age, can you submit a work permit after employment?
Yes_____ No_____ Not Applicable_____

4. Can you, after employment submit verification of your legal right to work in the U. S.?
Yes_____ No_____

5. Have you ever been convicted of a criminal offense (felony or serious misdemeanor?)
(Convictions for marijuana-related offenses that are more than two (2) year old need not be listed).
Yes_____ No_____

If Yes, state nature of the crime(s), when and where convicted and disposition of the case.

(NOTE: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances, and the relevance of the offense to the position(S) applied for may,

however, be considered).

5. Are you able to perform the essential functions of the job for which you are applying?
Yes _____ No _____

If No, describe the functions that cannot be performed _____

(NOTE: We comply with the ADA and consider reasonable accommodations that may be necessary for eligible applicants to perform essential functions. Hire may be subject to passing a medical examination and to skill and agility tests).

7. Are you currently employed? Yes _____ No _____

If Yes, may be contact your current employer? Yes _____ No _____

EDUCATIONAL INFORMATION:

| | |
|---------------------|--------------|
| Name of High School | No. of Years |
|---------------------|--------------|

Address

| | | |
|-----------------|--------------|-------|
| Name of College | No. of Years | Major |
|-----------------|--------------|-------|

| | |
|---------|--------|
| Address | Degree |
|---------|--------|

| | | |
|---------------------------------|--------------|------------|
| Trade, Professional, etc., Name | No. of Years | Cert./Lic. |
|---------------------------------|--------------|------------|

Address

Type of School

MILITARY:

| | | |
|-------------------|-----------|------------|
| Branch of Service | Specialty | Final Rank |
|-------------------|-----------|------------|

REFERENCES:

Name Address Telephone

Name Address Telephone

Name Address Telephone

BEGINNING WITH THE MOST RECENT JOB, LIST YOUR EMPLOYMENT FOR THE PAST TEN (10) YEARS.

1. _____
Name of Company Dates of Employment

Address and Telephone

Position Held, Ending Rate of Pay, and Supervisor

Reason for Leaving

2. _____
Name of Company Dates of Employment

Address and Telephone

Position Held, Ending Rate of Pay, and Supervisor

Reason for Leaving

3. _____
Name of Company Dates of Employment

Address and Telephone

Position Held, Ending Rate of Pay, and Supervisor

Reason for Leaving

4.

Name of Company

Dates of Employment

Address and Telephone

Position Held, Ending Rate of Pay, and Supervisor

Reason for Leaving

PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW.

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorized the Company to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the Company any and all letters, reports, and other information related to my work records, without giving me prior notice to such disclosure. In addition, I hereby release the Company, my former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without cause or prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and an Officer of the Company.

_____ I understand and agree, that if employed, I will abide by all policies and procedures established by the Company.

Applicant's Signature

Date