



DATE:

EDUCATION

EXPERIENCE

Please list all past work history including military and summer work. Use additional paper if necessary. (Please complete fully even if submitting resume)
START WITH PRESENT/LAST EMPLOYER

PRESENT/LAST EMPLOYER		EMPLOYER'S ADDRESS AND PHONE NUMBER	
LAST SUPERVISOR/PHONE NUMBER		REASON FOR LEAVING	DATES OF EMPLOYMENT FROM: TO:
STARTING SALARY	PRESENT/LAST SALARY	PRESENT/LAST BONUS/COMM.	YOUR JOB TITLE(S)
DESCRIBE YOUR DUTIES AND RESPONSIBILITIES			

EMPLOYER		EMPLOYER'S ADDRESS AND PHONE NUMBER	
LAST SUPERVISOR/PHONE NUMBER		REASON FOR LEAVING	DATES OF EMPLOYMENT FROM: TO:
STARTING SALARY	PRESENT/LAST SALARY	PRESENT/LAST BONUS/COMM.	YOUR JOB TITLE(S)
DESCRIBE YOUR DUTIES AND RESPONSIBILITIES			

EMPLOYER		EMPLOYER'S ADDRESS AND PHONE NUMBER	
LAST SUPERVISOR/PHONE NUMBER		REASON FOR LEAVING	DATES OF EMPLOYMENT FROM: TO:
STARTING SALARY	PRESENT/LAST SALARY	PRESENT/LAST BONUS/COMM.	YOUR JOB TITLE(S)
DESCRIBE YOUR DUTIES AND RESPONSIBILITIES			

PLEASE PROVIDE THREE BUSINESS REFERENCES OTHER THAN THOSE LISTED ABOVE

NAME	TITLE	PHONE NUMBER	LENGTH OF TIME KNOWN
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PLEASE READ THE FOLLOWING VERY CAREFULLY BEFORE SIGNING.

It is the policy of Beck Cabinet Company to seek and employ the best qualified personnel and to provide equal opportunity for the advancement of employees and to administer our personnel policies in a manner that will not discriminate against any person because of race, color, religion, age, sexual orientation, marital or veteran status, national origin, ancestry, disability, on the job injuries, union affiliation, or any other legally protected status unless it is a bona fide occupational requirement reasonably necessary to the operation of our business.

I acknowledge that the information I have supplied is correct to the best of my knowledge and belief without any omissions of any kind whatsoever. I understand that any falsifications, misrepresentations or omissions of fact may be grounds for rejection of my application or discharge at any time during my employment.

I understand that consideration for employment in this position is contingent upon the results of a reference and background check. I authorize the Company to investigate all statements made on my application for employment and to discuss the results of its investigations with those responsible for hiring. I further authorize the Company to contact my former employer(s) and any listed references or other persons who can verify information, and I give my consent for former employer(s) and other contacted persons to respond to questions pertaining to information on this application. Further, I release from liability such former employer(s) or other persons contacted by providing information to the Company.

I understand that nothing in this application is intended to imply or create a contract of employment. I further understand that, if hired, my employment is at-will and can be terminated at any time for any reason, by the Company or me, with or without notice.

I acknowledge and agree that employment in the position for which I have applied may be contingent upon completion of a Company-paid physical examination. In addition, I understand that employment in this position may be contingent upon successful completion of a test for the presence of illegal substances.

APPLICANT'S SIGNATURE	DATE (MONTH & YEAR)
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