



Four Corners Siding & Windows

Cheyenne Owned & Operated

EMPLOYEE APPLICATION FORM

Character out weighs Selfish Attitude's

NAME (last name first) - _____ SOC SEC # - _____
CURRENT ADDRESS - _____ CITY - _____ STATE - _____
PHONE # - _____ US CITIZEN - Yes No ARE YOU 18 - Yes No

VALID DRIVERS LICENSE - Yes No LICENSE # - _____ STATE ISSUE - _____ EXP - _____
DO YOU HAVE ANY DRIVING RESTRICTIONS - Yes No If so Explain - _____

DO YOU HAVE ANY RESPONSIBILITIES AWAY FROM WORK THAT WILL INTERFERE WITH JOB RE-
QUIREMENTS RELATING TO LONG HOURS, WEEKENDS OR DAILY TRAVEL? Yes No If Yes Explain.

EVER BEEN CONVICTED OF A CRIME - Yes No

DO YOU HAVE ANY PHYSICAL CONDITIONS THAT WOULD PREVENT YOU FROM CLIMBING LADDERS,
WALKING ROOFS AND CARRYING UP TO 100#? Yes No If so Explain.

ARE YOU COMFORTABLE WORKING AT HEIGHTS FROM SCAFFOLDING, LADDERS, ON ROOFS? Yes No

ARE YOU WILLING TO WORK OUTSIDE YEAR ROUND IN ADVERSE CONDITIONS - Yes No

ARE YOU WILLING TO TAKE A PRE EMPLOYMENT PHYSICAL EXAM? Yes No

ARE YOU WILLING TO TAKE A PER EMPLOYMENT SUBSTANCE ABUSE TEST? Yes No

WORK DESIRED - Full Time / Part Time ABLE TO WORK M-F & SAT WHEN NEEDED - Yes No
ABLE TO WORK 6AM-7PM - Yes No HRS PER WEEK DESIRED - _____ PAY DESIRED - _____

DATE YOU CAN START - _____
CURRENTLY EMPLOYED - Yes No IF Yes CAN WE INQUIRE YOUR PRESENT EMPLOYER - Yes No

CURRENT EMPLOYER NAME AND NUMBER - _____

APPLIED TO THIS COMPANY BEFORE - Yes No

<u>EDUCATION -</u>	<u>Name of School</u>	<u>Years Attend</u>	<u>Did You Graduate</u>
-	_____	_____	_____
-	_____	_____	_____

FORMER EMPLOYERS -

<u>NAME/ADDRESS</u>	<u>PAY</u>	<u>POSITION</u>	<u>WHY LEAVE</u>	<u>DATES THERE</u>
-	_____	_____	_____	_____
-	_____	_____	_____	_____
-	_____	_____	_____	_____

REFERENCES (give names of 3 persons not related to you that you have known for at least 5 years.)

<u>Name</u>	<u>Address</u>	<u>Business or Personal Ref</u>	<u>Yrs Known</u>	<u>Phone #</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

“I certify the information in this application is true and complete to the best of my knowledge and understanding that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that the information in this application and signature below authorize this authority. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment.”

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Date - _____

Signature - _____

DO NOT WRITE BELOW THIS LINE

Notes-

Neatness -
Personality -
Hired -

Character -
Ability -
Salary -

Approved - Yes No