

# Employment Application

Answer each question fully and accurately

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APPLICANT INFORMATION			
Last Name	First	M.I.	Date:
Street Address		Phone #:	
City	State	ZIP	
Date available to start:	Social Security Number:		
Are you a citizen of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, are you authorized to work in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Have you ever worked for this company? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, when?			
Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain?			
Driving jobs <u>ONLY</u> : Do you have a valid driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/> License #:			
Has your driver's license been suspended or revoked in the last 3 Years? Yes <input type="checkbox"/> No <input type="checkbox"/> Why?			
Are you 18 years of age or older? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If hired, can you furnish proof of your eligibility to work in U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>			

APPLYING FOR: (check one or more)
Milling <input type="checkbox"/> Assembly <input type="checkbox"/> Finish <input type="checkbox"/> Engineering <input type="checkbox"/> Sales/Design <input type="checkbox"/> Delivery <input type="checkbox"/> Cust. Srv. <input type="checkbox"/> HR/Accounting <input type="checkbox"/>

EDUCATION			
High School		City / State	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
College / Vocational:		City / State	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree

REFERENCES <i>Please list three professional references.</i>	
Full name	Relationship
Company & Location:	Phone ( )
Full name	Relationship
Company & Location:	Phone ( )
Full name	Relationship
Company & Location:	Phone ( )

**Tharp Cabinet Corporation is a Equal Opportunity Employer: We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.**

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PREVIOUS EMPLOYMENT		
Company		Phone ( )
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
Company		Phone ( )
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
Company		Phone ( )
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving

SOFTWARE & TOOL EXPERIENCE ((List below))

DISCLAIMER AND SIGNATURE
<p>I certify that my answers are true and complete. I authorize the investigation of any or all statements in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organization to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p> <p>I understand that if I am extended an offer of employment it will be conditioned upon my successfully passing a pre-employment drug screen, back ground check, reference check and a clean drivers record (employees driving company vehicles)</p> <p>I understand that your employment with us is "employment at will" and is voluntary in nature. You have not been employed for any specific amount of time.</p>
<b>Signature:</b> _____ <b>Date:</b> _____

Please hand deliver, fax, or email your completed application to:

**Tharp Cabinet Corporation**  
1246 North Denver Ave. • Loveland, Co. 80537  
Ph: 970-667-7144 • Fax: 970-635-2660 • [www.tharpcabinets.com](http://www.tharpcabinets.com)