



Application for Employment

This is a typeable form in Adobe or you may complete the form clearly in ink.
Please sign where indicated on pages 4, 5, & 6 and fax to (508) 339-4518
or return to National Lumber, Human Resources, 71 Maple St, Mansfield, MA 02048.
We cannot process unsigned applications.

Please print clearly in ink and complete the entire application.

APPLICANT INFORMATION

Today's Date: _____

Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State) (Zip)

Previous Address: _____
(Street) (City) (State) (Zip)

Telephone: () _____ () _____
(Days) (Evenings)

Email address: _____

Are you at least 18 years old? Y N Are you legally authorized to work in the U.S.? Y N

How did you hear of our company? Newspaper Employee Referral
 Agency Other _____
Employee Name: _____

JOB INTEREST

Are you currently employed? Y N If not, when was your last day of employment? _____

Position Applied For: _____

Shift Preference: Full Time Part-Time Temp Seasonal

Part-Time Days/Hours Preference: _____

How soon could you start? _____

Are you available to work overtime? Yes No

Our company is committed to a policy of nondiscrimination and equal opportunity for all employees and qualified applicants without regard to race, color, religious creed, national origin, ancestry, sex, sexual orientation, age, disability, veteran's status or genetic information.

Revised November 2010

EDUCATIONAL BACKGROUND

Type of School	Name and City	Did you Graduate?	Course or Major
College			
Technical School			
High School			
Other			

LIST ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH MOST RECENT

Company Name:				Dates Worked		Position(s) Held:	
Address, City, State, Zip:				From	To		
Phone No. :		()		Duties/Responsibilities:			
Type of Business:							
Supervisor:				Reason for Leaving:			
Base Gross Income \$:	Starting Wage:	Per	Present Wage:	Per	<input type="checkbox"/> Bonus	Amount	Hours Worked
		<input type="checkbox"/> Hour <input type="checkbox"/> Year		<input type="checkbox"/> Hour <input type="checkbox"/> Year	<input type="checkbox"/> Incentive		

Company Name:				Dates Worked		Position(s) Held:	
Address, City, State, Zip:				From	To		
Phone No. :		()		Duties/Responsibilities:			
Type of Business:							
Supervisor:				Reason for Leaving:			
Base Gross Income \$:	Starting Wage:	Per	Present Wage:	Per	<input type="checkbox"/> Bonus	Amount	Hours Worked
		<input type="checkbox"/> Hour <input type="checkbox"/> Year		<input type="checkbox"/> Hour <input type="checkbox"/> Year	<input type="checkbox"/> Incentive		

Company Name:				Dates Worked		Position(s) Held:	
Address, City, State, Zip:				From	To		
Phone No. :		()		Duties/Responsibilities:			
Type of Business:							
Supervisor:				Reason for Leaving:			
Base Gross Income \$:	Starting Wage:	Per	Present Wage:	Per	<input type="checkbox"/> Bonus	Amount	Hours Worked
		<input type="checkbox"/> Hour <input type="checkbox"/> Year		<input type="checkbox"/> Hour <input type="checkbox"/> Year	<input type="checkbox"/> Incentive		

VOLUNTEER WORK: All applicants are welcome to provide verifiable volunteer work history below. You are not required to include organizational names that would indicate possible membership in a protected class such as race, color, religion, sex or national origin.

Company Name:				Dates Worked		Position(s) Held:	
Address, City, State, Zip:				From	To		
Phone No. :		()		Reason for Leaving:			
Supervisor:							
Hours Worked:							
Duties/Responsibilities:							

WORK REFERENCES

Name:		Years Known:	Relationship & Title:	
Company:			Home Phone	Work Phone
Work Address, City, State, Zip:				

Name:		Years Known:	Relationship & Title:	
Company:			Home Phone	Work Phone
Work Address, City, State, Zip:				

Name:		Years Known:	Relationship & Title:	
Company:			Home Phone	Work Phone
Work Address, City, State, Zip:				

SPECIAL SKILLS (Please check the skills for which you have received training)

<input type="checkbox"/> Word Processing WPM ()	<input type="checkbox"/> Data Entry	<input type="checkbox"/> 10 – Key Calculator
<input type="checkbox"/> Software Packages:		
<input type="checkbox"/> Programming Languages:		
<input type="checkbox"/> Database:		
<input type="checkbox"/> Manufacturing Equipment:		
<input type="checkbox"/> Other:		

Training Courses Describe any relevant training programs you have completed. Include the types of training, the sources of the training, and the dates of the training.

Required License(s) If required to drive a motor vehicle in the job applied for, do you have a valid driver's license?

Yes No If yes, please provide #: _____ State: _____

Are you licensed with any group, association or society relating to the job for which you are applying? Yes No

If yes: License Name & # _____ Issuing State: _____ Expires _____

Briefly describe the type of work for which you are best qualified.

Note any details about your qualifications. Include special skills such as machines operated, licenses, etc.

JOB APPLICANTS AGREEMENT AND CERTIFICATION

"I certify that the information given to me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in this application to verify my statements, and I authorize the past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information."

"I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Reliable Truss and Components and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon Reliable Truss and Components unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that Reliable Truss and Components retains that same right."

"I understand that prior to being offered employment with Reliable Truss and Components; I may be requested to take an employment examination. In the event I have a disability that will affect my ability to take the test, I will so inform Reliable Truss and Components prior to the administration of the test so that a reasonable accommodation can be made. Requested accommodations may include accessible testing sites, modified testing conditions, and accessible testing formats. Reliable Truss and Components reserves the right to require medical documentation concerning the need for accommodations."

"I understand that if employed, policies and rules which are issued are not conditions of employment and that the employer may revise policies or procedures, in whole or in part, at any time."

"I understand that this application will be kept on active file for 30 days from the date completed, after which time I would have to reapply in accordance with established company procedures."

Signature of Applicant

Date Signed

Applicant Name (*please print*): _____

Massachusetts General Laws c.149 s19B requires that the following statement be included on employment applications: "It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability."

Massachusetts General Laws c.151B defines "genetic information" as any written record or explanation of a genetic test of a person's family history with regard to the presence, absence or variation of a gene. A genetic test is broadly defined as "any test of DNA, RNA, mitochondrial DNA, chromosome or proteins for the purpose of identifying genes or genetic abnormalities." The law expressly excludes drug and alcohol tests from this definition, meaning that employers may continue to conduct such tests in accordance with existing legal requirements.

These new statutory provisions specifically prohibit employers from (1) terminating or refusing to hire individuals on the basis of genetic information; (2) requesting genetic information concerning employees, applicants or their family members; (3) attempting to induce individuals to undergo genetic tests or otherwise disclose genetic information; (4) using genetic information in any way that affects the terms and conditions of an individual's employment; or (5) seeking, receiving or maintaining genetic information for any non-medical purpose.



Release & Authorization Consumer Report and Drug/Alcohol Testing Disclosure

I hereby authorize, without reservation, Creative Services, Inc. of 64 Pratt Street, Mansfield, MA 02048-1927, (800) 536-0093/(508) 339-5451 and its agents to conduct a full investigation into my background and activities at any point after this authorization and, if hired, throughout my employment. Therefore, I hereby authorize the release of any and all information pertaining to me, documentary or otherwise, as requested by any appropriate employee, agent or representative of Creative Services, Inc. I understand that during this background investigation process and in accordance with the Fair Credit Reporting Act & The Department of Transportation, a "consumer report," "consumer credit report," and/or "investigative consumer report" (consumer report) may be obtained concerning my character, general reputation, personal characteristics, and mode of living. The nature and scope of my investigation may include but is not limited to employment, credit, education, criminal, and driving history. I release all courts, probation departments, selective service boards, employers, educational institutions, banks, credit bureaus, financial and other institutions, law enforcement and local, state, and federal government agencies without exception, both foreign and domestic to furnish any and all background information (including, but not limited to, driving and/or motor vehicle records) requested by Creative Services, Inc. I understand that this information may be transmitted electronically and authorize such transmissions. I agree that a photocopy of this release shall be accepted with the same authority as the original.

California, Minnesota, and Oklahoma applicants or employees only: Please check this box if you would like a copy of the consumer report if one is prepared on you?

If currently employed, may we contact your current employer? YES NO N/A

Name: _____
(LAST NAME) (FIRST NAME) (MIDDLE NAME)

Other Names:

List all other NAMES (including maiden or married names) utilized during the previous 7 years and/or used when obtaining any degrees or certifications.

Current Address: _____
City & State: _____ Zip Code: _____
Social Security Number:* _____ Date of Birth:* _____
Driver's License Number:* _____ State of Issue: _____

Please list all addresses from the past seven years:

(Street) (City) (State) (Zip Code)

(Street) (City) (State) (Zip Code)

(Street) (City) (State) (Zip Code)

(Street) (City) (State) (Zip Code)

In conforming with 49 C.F.R. Part 40, Section 391.23, I hereby authorize the companies listed below to furnish to Creative Services, Inc. the following information concerning drug and alcohol tests, including but not limited to DOT drug and alcohol testing violations including pre-employment tests during the past three years: (1) alcohol tests with a concentration result of .04 or greater; (2) verified positive drug tests results; (3) refusals to be tested (including verified adulterated or substituted drug test results); (4) other violations of DOT drug and alcohol testing regulations; and (5) successful completion of my return-to-duty requirements, including follow-up tests.

I fully understand that the information I authorize Creative Services, Inc. to receive involves tests which were required by the Department of Transportation (DOT). If any company listed below furnishes Creative Services, Inc. with information concerning items (1) through (5) above, I also authorize that company to release and furnish: (6) the dates of my negative drug and/or alcohol tests and/or tests with results below .04 during the past three years; and (7) the name and phone number of any substance abuse professional who evaluated me during the past three years.

Company	City	State	Telephone
_____	_____	_____	() - .
_____	_____	_____	() - .
_____	_____	_____	() - .
_____	_____	_____	() - .

By signing this document below, I certify that I have read and fully understand this release. I sign this document voluntarily with the knowledge that the information being released could affect my being hired. I further certify that the information I have furnished is true and complete and that I have listed every company for which I have worked as a driver during the past three years.

Signature: _____ Date: _____

* Social security numbers, dates of birth, and drivers' license numbers are requested to ensure accurate retrieval of records. They will not be considered by the employer in making employment decisions. This form will be filed separately from your employment application.

DISCLOSURE AND ACKNOWLEDGMENT

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT]

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Reliable Truss and Components Inc. ("the Company") may obtain information about you from a consumer reporting agency, a consumer credit reporting agency, and/or an investigative consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report," "consumer credit report," and/or an "investigative consumer report" (consumer report) obtained for employment purposes, which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These consumer reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment.

You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any consumer report. Please be advised that the nature and scope of the most common form of consumer report obtained with regard to applicants for employment is an investigation into your employment and criminal history conducted by Creative Services, Inc., 64 Pratt Street, Mansfield, MA 02048, (800) 536-0093 / (508) 339-5451. The scope of this notice and authorization is all-encompassing; allowing the Company to obtain from any outside organization all manner of consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any consumer report.

Privacy Policy: Creative Services, Inc. (CSI) considers privacy and information security among its highest priorities and has established physical, electronic and procedural safeguards to protect sensitive information in compliance with state, federal and Safe Harbor/European Union laws regarding background screening and privacy. The complete text of CSI's Privacy Policy may be viewed on CSI's website at http://www.creativeservices.com/html/privacy_policy.html, or obtained in writing by request to Creative Services, Inc., 64 Pratt Street, Mansfield, MA 02048, (800) 536-0093/ (508) 339-5451.

New York applicants or employees only: You have the right to inspect and receive a copy of any consumer report requested by the Company by contacting the consumer reporting agency identified above.

ACKNOWLEDGMENT

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents.

California applicants or employees only: By signing below, you also acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW.

Signature: _____

Date: _____