



EMPLOYMENT APPLICATION

At Anawalt Lumber, we value the people who work for us. That's why we strive to support and encourage each employee by providing an energetic and friendly place to work, outstanding career opportunities and an exceptional compensation and benefits package.

If you are interested in joining a family company that treats you like family, please complete the application inside. We uphold our tradition of valuing our employees by providing equal employment opportunities to all applicants regardless of race, religious creed, color, age, sex, sexual orientation, gender identity, national origin, religion, marital status, medical condition, disability, military service or veteran status, pregnancy, childbirth and related medical conditions, or any other classification protected by federal, state, and local laws and ordinances.

Anawalt also endeavors to provide reasonable accommodations to the known physical or mental limitations of qualified applicants with disabilities to assist in the hiring process and to qualified employees with disabilities to performance the essential job functions unless the accommodation would impose an undue hardship on the operation of our business. If you believe you require such assistance to complete this form or to participate in an interview, please let us know.

A diverse community and workplace benefit us all. We are committed to giving people of all backgrounds an opportunity to work and contribute to our company and community.

PLEASE COMPLETE ALL SECTIONS OF THIS APPLICATION

Print or type legibly. Answer all questions specifically and completely, providing exact dates.

GENERAL INFORMATION

Last Name	First Name	Middle Initial
Department Desired	Home Phone Number	
Street Address	City	State Zip Code
Names of people you know now working for Anawalt:	Were you referred to Anawalt for employment? If so, by whom? Yes No	
Why are you choosing to make a job or career change at this time?		
Why are you interested in employment with Anawalt?		
What does customer service mean to you?		
If under the age of 18, can you produce the necessary work permit at the time of employment? Yes No	Can you work any store hours? Yes No	If not, how many hours per week can you work?
Can you work more than 30 hours a week? Yes No	Do you plan to maintain another job if you accept a position with Anawalt? Yes No	
If so, where?		What hours?
Are you legally authorized to work in the United States? Yes No (Proof of citizenship or immigration status will be required upon employment.)		
Have you ever been fired? If yes, please explain: Yes No	Do you currently use illegal drugs? Yes No	
If offered a position with Anawalt, I would be able to accept employment at this time: Yes No		

EDUCATION

	Name & address of school	Circle year completed	Graduated?	Degree Earned
High School		1 2 3 4	Yes No	
College		1 2 3 4	Yes No	
Other		1 2 3 4	Yes No	

PREVIOUS EMPLOYMENT INFORMATION

Company			Phone Number		
Address			City & State		
Supervisor's Name & Title			Length of Service: From: To:		
Type of work at start	<input type="checkbox"/>	Full-Time			
	<input type="checkbox"/>	Part-Time			
Type of work upon leaving?	<input type="checkbox"/>	Full-Time	Are you eligible to be rehired? Yes No	How would you rate your performance?	
	<input type="checkbox"/>	Part-Time			
Reason for leaving?					
May we contact this employer for a reference?		Yes No	If no. Why not?		

Company			Phone Number		
Address			City & State		
Supervisor's Name & Title			Length of Service: From: To:		
Type of work at start	<input type="checkbox"/>	Full-Time			
	<input type="checkbox"/>	Part-Time			
Type of work upon leaving?	<input type="checkbox"/>	Full-Time	Are you eligible to be rehired? Yes No	How would you rate your performance?	
	<input type="checkbox"/>	Part-Time			
Reason for leaving?					
May we contact this employer for a reference?		Yes No	If no. Why not?		

Company			Phone Number		
Address			City & State		
Supervisor's Name & Title			Length of Service: From: To:		
Type of work at start	<input type="checkbox"/>	Full-Time			
	<input type="checkbox"/>	Part-Time			
Type of work upon leaving?	<input type="checkbox"/>	Full-Time	Are you eligible to be rehired? Yes No	How would you rate your performance?	
	<input type="checkbox"/>	Part-Time			
Reason for leaving?					
May we contact this employer for a reference?		Yes No	If no. Why not?		

PLEASE READ AND SIGN "IMPORTANT INFORMATION" ON THE NEXT PAGE

PERSONAL REFERENCES

List three character references, other than relatives or former employers, who have known you for the past three years.

Name	Address	Occupation	Phone Number
1.			
2.			
3.			
4.			

IMPORTANT INFORMATION FOR YOU

Please read the following information carefully. Your signature below is required for you to be considered for employment. It also acknowledges you have read, understood and agree to the information below.

About the information on this application:

I certify, under penalty of perjury, that all of the above information is true and complete, and I understand that any falsification or omission of information may result in denial of employment or, if hired, may result in my termination from employment from Anawalt Lumber. .

PUBLIC RECORDS DISCLOSURE STATEMENT

I acknowledge that in connection with my application for employment or subsequent employment, Anawalt Lumber may collect, assemble, evaluate, compile, report, transmit, transfer or communicate information on my character, general reputation, personal characteristics or mode of living which are matters of public record without using a third party investigative consumer reporting agency. Matters of public record are defined as records documenting an arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment.

I understand that such public record information generally must be disclosed to me within seven days of the date the information is received, regardless of whether it is received orally or in writing. I understand that I may waive my right to receive such information.

By checking this box , I hereby waive my right to any such disclosure.

CERTIFICATION - PLEASE READ CAREFULLY

I consent to and authorize Anawalt Lumber to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for

employment. I further authorize the listed employers, schools and professional references to give the employer (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing such information reference.

I understand that any hiring decision is contingent upon my successful completion of all of Anawalt Lumber's lawful pre-employment checks, which may include a background check. I agree to execute any consent forms necessary for Anawalt Lumber to conduct its lawful pre-employment checks.

I also understand and agree that, if hired, as a condition of employment and to the extent permitted by federal, state, and local laws, I may be required to sign a confidentiality agreement and/or conflict of interest statement, as well as an agreement to arbitrate all claims I may have against Anawalt Lumber.

This application is current for 60 days. At the conclusion of that time, if I have not heard from Anawalt Lumber and still wish to be considered for employment, it will be necessary to complete a new application.

Date _____ / _____ / _____

About at-will employment:

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT, HAVING NO SPECIFIED TERM, IS BASED UPON MUTUAL CONSENT AND MAY BE TERMINATED AT WILL, WITH OR WITHOUT CAUSE, BY EITHER PARTY (ANAWALT LUMBER OR ME) WITHOUT PRIOR NOTICE TO THE OTHER. I ALSO UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT MAY NOT CHANGE, ON AN INDIVIDUAL OR COLLECTIVE BASIS, ABSENT WRITTEN AGREEMENT SIGNED BY THE PRESIDENT OF ANAWALT LUMBER AND ME OR MY REPRESENTATIVE. THIS APPLICATION DOES NOT CONSTITUTE AN AGREEMENT OR CONTRACT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OR DEFINITE DURATION.

Date: _____

Signature of Applicant: _____