

### **EMPLOYMENT APPLICATION**

(PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS)

Value Plus Flooring fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, disability, or any other basis prohibited by federal, state or local law. In accordance with requirements of the Americans With Disabilities Act, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As Equal Opportunity Employers, we intend to comply fully with applicable federal and State employment laws and the information requested on this application will only be used for purposes consistent with those laws. Applications are only accepted for positions currently available and will only be considered for thirty (30) days from today's date or until the position applied for are filled, whichever occurs first.

POSITION APPLIED F	OR:	DATE:	
PERSONAL DA'	ГА:		
Salary expectations:			
Last Name	First Middle	Social Security Number	
Street Address	City State/Zip Code	Telephone Number	
	s of age, please specify your age he sed only for child labor law purposes.		
Are there any days, shift	ts or hours you will not work?	If yes, please explain:	
Are you available for ou	t of town work?	_ Will you work overtime, if required?	
When will you be able t	o start work?		

Have you taken any illegal drugs in the last 30 days?
Are there any physical restriction that would prevent you from working in the position applied for? YES NO
If yes, please explain
Have you ever been a defendant in a civil action for an intentional tort (intentional commission of a wrongful act)? Yes No (Note: Answering "yes" does not automatically exclude you from further consideration for the position.)  If yes, include nature of the intentional tort and the disposition of the action:
How did you learn of our Company?
If referral, who were you referred by?
Have you ever applied or worked at our Company before? Yes No  If yes, provide dates:
Are you legally authorized to work in the United States? Yes No
Will you now or in the future require sponsorship for employment visa status (e.g.,H-1B visa status)? Yes No
Note: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form 1-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.
<b>Driving Record:</b> (Answer only if driving is a requirement of the job for which you are applying)
Do you have a valid driver's license? Yes No State:
License No.:
Have you had any tickets? Yes No If yes, please explain:
Has your license ever been suspended or revoked? Yes No If yes, please explain:

recent)

Street Address

**EDUCATION:** Describe any educational degrees, skills, training or experience you believe are relevant to the job applied fo If no, Graduated? Type of Degree Name, City and State of Educational Degree Received or Credits Institution Major Minor Overall GPA Yes No Expected Earned High School College or University

**Residences:** (Please provide your addresses of residence for the past 7 years beginning with the most

City, State and Zip Code

To:

From:

Technical/GED	_			
	l.			
	_			
Licenses/Certifications/Other				

# **Employment History:**

Please complete for all full-time or part-time employment beginning with most recent employer. You may include as part of your employment history any verified work performed on a volunteer basis.

Company Name			Telephone #			
Address			Dates Employed	From		То
Name of Supervisor	May we contact? Yes	No	Rates of Pay	Start		Last
State job titles and describe j	ob duties		Reason for leaving			
		_				
Company Name			Telephone #			
Address			Dates Employed	From		То
Name of Supervisor	May we contact? Yes	No	Rates of Pay	Start		Last
State job titles and describe j	ob duties		Reason for leaving			
		_				
		_				

Company Name		Telephone #			
Address		Dates Employed	From		То
Name of Supervisor	May we contact? Yes No	Rates of Pay	Start		Last
State job titles and describe	e job duties	Reason for leaving			
Company Name		Telephone #			
Address		Dates Employed	From		To
Name of Supervisor	May we contact? Yes No	Rates of Pay	Start		Last
State job titles and describe	e job duties	Reason for leaving			
Please explain any gaps in y	vour employment history				
Have you ever been dischar If yes, explain:	rged or forced to resign? Yes	No			
Did you receive any discipl If yes, please explain:	ine in the last 12 months of active en	nployment? Yes	No		
	ompete or non-solicit agreement wit es No If yes, please explain:				
(You may be required to fu	ırnish a copy of the agreement)				

# **References:**

Please list three persons not related to you who know your qualifications.

	NAME	ADDRESS	PHONE	RELATIONSHIP	
Mil	itary Service	Complete only if you	u served in the military)		
Branc	ch of Service:		Number of Ye	rs/Months of Service:	
Rank	at Discharge:	Date of I	Discharge: R	eason for leaving:	
Desc	ribe any military sk	ills, training or experience	ce you believe are releva	nt to the job applied for:	
		, , ,	,	, 11	
Cri <sup>.</sup>	minal Recor	d Information:			
<b>C11</b> .		d Imormation.			
				vering the following questions, you may exo der first-offender law or otherwise eradicat	
statut	te or court order. Y	You may also exclude a fir	rst conviction for any of	the following misdemeanors; drunkenness,	
	1 0	traffic violations, affray	-		
	minal conviction w rements.	ill not necessarily be a ba	r to employment but wi	l be considered in relation to specific job	
• F	Have you been conv	ricted of a felony within t	he last seven years?		
	,	lo	,	on:	
d	ishonest conduct; o			ion of funds, embezzlement, or similar for a urglary, robbery, breaking and entering or t	
Y	es I	No	If Yes, Date of Convict	on:	

•	Have you been convicted of or completed a period of incarceration within the past five years for any misdemeanor?
	Yes No
	If the answer to the above question is "yes", please state whether you were convicted more than five years ago for any offense?
	Yes No
•	A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please descril your criminal conviction(s) including penalty(ies) imposed, listing the nature of your offense(s), and your rehabilitation since the conviction(s).

#### APPLICANT'S ACKNOWLEDGMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document may be cause for my dismissal at any time without prior notice. I consent to and authorize this Company 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 personal references to give the Company (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 a good faith reference.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR MY EMPLOYER WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER POLICY, CUSTOM, BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE BASIC EMPLOYMENT POLICIES, PERSONNEL HANDBOOK OR

ANY PERSONNEL MANUALS) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE EMPLOYER. I ALSO UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT MAY NOT CHANGE ABSENT AN INDIVIDUAL WRITTEN AGREEMENT SIGNED BY BOTH ME AND THE PRESIDENT/CEO OF THE COMPANY.

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination; submit to a background investigation; take a pre-employment drug test. If I am offered employment or start work before any required test is completed, my employment is contingent on a satisfactory result on all required tests. I authorize the release of any background check results of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from the Company at the conclusion of this 30 day period, it is my responsibility to complete a new application if I still wish to be considered for employment.

#### **CERTIFICATION FOR ALL APPLICANTS - PLEASE READ CAREFULLY**

This certifies that this application was completed by me, and that al	l entries on it and information in it are true and
complete to the best of my knowledge.	
Signature:	Date: