Loudoun Stairs, Inc.

APPLICATION FOR EMPLOYMENT — NON-EXEMPT POSITION

Applicant Name: Last First Middle	Application Date:
Present Address: Street City State Zip Code	
Telephone: ( )	Email Address:
Are you 18 years old or older? ☐ Yes ☐ No Do you have a valid driver's license? ☐ Yes ☐ No	Are you either a U.S. citizen or an alien authorized to work in the U.S.? ☐ Yes ☐ No
Have you ever worked or attended school under another name? ☐ Yes ☐ No If so, under what name?	
Have you ever been convicted of a crime?* ☐ Yes ☐ No If yes, give details, including date(s): ** A "yes" answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by applicable law.*	

POSITION DESIRED

Position:	Date you can start:	Salary desired:
Are you available to work overtime? ☐ Yes ☐ No		
Have you previously worked for this company? ☐ Yes ☐ No If so, from _____ to _____ Reason for leaving: Former supervisor(s) at this company:		
How did you learn about this opening?		

EDUCATION

High School:	Graduated? ☐ Yes ☐ No	Course of Study:
Technical School:	Graduated? ☐ Yes ☐ No	Course of Study:
College/University:	Graduated? ☐ Yes ☐ No	Course of Study:
Other education or training: Other special skills:		

MILITARY EXPERIENCE

Branch of Service:	Dates Served:	Rank at Discharge:
Education and Training:		

WORK EXPERIENCE

Please list all previous employment, beginning with the most recent. If you need more room, you may attach another sheet of paper.

Employer:		Address:
From:_____ To: _____ Final Salary: _____	Position Held:	Reason for leaving:
Supervisor's Name & Title:		May we contact? Yes ☐ No
Description of Duties:		
Employer:		Address:
From:_____ To: _____ Final Salary: _____	Position Held:	Reason for leaving:
Supervisor's Name & Title:		May we contact? Yes ☐ No
Description of Duties:		
Employer:		Address:
From:_____ To: _____ Final Salary: _____	Position Held:	Reason for leaving:
Supervisor's Name & Title:		May we contact? Yes ☐ No
Description of Duties:		

LIST 3 BUSINESS REFERENCES

Name	Telephone Number
1. _____	_____
2. _____	_____
3. _____	_____

AUTHORIZATION AND ACKNOWLEDGMENTS

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on this application may be grounds for dismissal.

I authorize investigation of all statements contained in this application. I also grant permission to contact all references listed above, and authorize them to release all information concerning my previous employment and any other pertinent information these references might have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you.

I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time and without prior notice.

_____/_____
Applicant Signature Date

DO NOT WRITE BELOW:

Interviewed By: _____ Date Reporting to Work: _____

Position: _____ Department: _____

Starting Salary: _____

_____/_____
Supervisor Signature Date