

LUNDBERG BUILDERS, INC.

314 Main Street
Stevensville, MD 21666

EMPLOYMENT APPLICATION

Today's Date _____

PRINT (USE INK):

Name _____ Telephone Number () _____
First Middle Last Home or Other

Email Address _____

Address _____

_____ How Long? _____
City State Zip

USE YOUR NORMAL HANDWRITING FOR REMAINDER OF APPLICATION. ANSWER EVERY QUESTION. ATTACH A SEPARATE SHEET, IF MORE SPACE IS NEEDED.

GENERAL INFORMATION SECTION

Position Applied For: _____ full-time part-time Temporary (summer)

RANK IN ORDER OF PREFERENCE THE TYPE OF WORK YOU DESIRE:

How or by whom were you referred to us? _____ Date available for work _____

Have you ever applied here before? Yes No

Are you over 18 years of age? Yes No

Are you legally eligible to work in this country? Yes No

Have you ever been convicted of a felony, misdemeanor, or any offense other than a minor traffic violation? Convictions will not necessarily disqualify you from employment. Yes No

Explain: _____

Start with the PRESENT or most RECENT employer, list all previous employers. Include self-employment, military service, summer and part-time jobs. If you need more space, continue on a separate sheet.

PRESENT/PREVIOUS EMPLOYER	DATES (mo/yr) & SALARY	POSITION & DUTIES
COMPANY NAME:	FROM \$	
STREET ADDRESS:	TO \$	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
CITY & STATE ZIP	TELEPHONE NUMBER	NAME & TITLE OF SUPERVISOR
REASON FOR LEAVING		

**EMPLOYMENT RECORD SECTION
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PREVIOUS EMPLOYER		DATES (mo/yr) & SALARY	POSITION & DUTIES
COMPANY NAME:		FROM \$	
STREET ADDRESS:		TO \$	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
CITY & STATE	ZIP	TELEPHONE NUMBER	NAME & TITLE OF SUPERVISOR
REASON FOR LEAVING			

NEXT PREVIOUS EMPLOYER		DATES (mo/yr) & SALARY	POSITION & DUTIES
COMPANY NAME:		FROM \$	
STREET ADDRESS:		TO \$	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
CITY & STATE	ZIP	TELEPHONE NUMBER	NAME & TITLE OF SUPERVISOR
REASON FOR LEAVING			

NEXT PREVIOUS EMPLOYER		DATES (mo/yr) & SALARY	POSITION & DUTIES
COMPANY NAME:		FROM \$	
STREET ADDRESS:		TO \$	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
CITY & STATE	ZIP	TELEPHONE NUMBER	NAME & TITLE OF SUPERVISOR
REASON FOR LEAVING			

If presently employed, why do you wish to change position? _____

EDUCATION SECTION

NAME	ADDRESS	CITY	STATE	MAJOR COURSE, OR SUBJECT	CIRCLE LAST YEAR COMPLETED	DEGREE	GRADE POINT AVERAGE
HIGH SCHOOL OR PREP					1 2 3 4		
BUSINESS SCHOOL					1 2 3 4		
COLLEGE					1 2 3 4		
GRADUATE WORK					1 2 3 4		

If you did not graduate, why and when did you leave school or college? _____

List scholastic honors, offices held, and activities in high school or college. Do not list organizations which reveal race, creed, color, national origin, religion, age, or sex.

ADDITIONAL TRAINING INFORMATION SECTION
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List any advanced courses or vocational training or certificates you have completed which relate to the job you are applying for. Use additional sheets if needed. (Example: If applying carpentry, you may want to list any job specific training, vocational certifications or seminars you attended. For administrative or office, note training such as word processing, computer software classes or job specific training.

COURSE	DATES ENROLLED FROM TO	SCHOOL OR OTHER SPONSOR OF COURSE	DESCRIBE MAJOR CONTENT OF COURSE	Grade / Certificate of Completion /CTUs/

Are you planning to pursue further studies? Yes No Day School Night School
 Part-time Full-time

If yes, when, where, and what course(s): _____

Use the space below to describe skills and aptitudes that you feel qualify you for a position at this Company. You may wish to include civic and community activities, professional societies in which you are participate, hobbies, sports, special training or skills such as typing, accounting, bookkeeping, computer/CRT machine, word processing, adding machine, or other skills. Please do not list organizations or activities which reveal race, religion, age, sex, national origin or ancestry, sexual orientation, disability or political persuasion. List only organizations that you consider relevant to your ability to do the job which you are applying. Use additional sheets as necessary.

REFERENCE SECTION

Please list references *other* than relatives, such as Supervisors, Managers, Subordinates and peers; people who can verify your work habits and performance. Providing this information means you give this Company permission to contact those individuals listed.

NAME	ADDRESS	TELEPHONE NUMBER

NAME OF APPLICANT _____

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PLEASE READ BEFORE SIGNING

If you have any questions regarding the following statements, please ask them of an employment interviewer *before* signing this application.

Lundberg Builders, Inc. is an equal opportunity employer and does not discriminate in its hiring or employment practices on the basis of race, color, religion, age, sex, sexual orientation, national origin or ancestry, disability, marital status, veteran status, or status within any other group protected by applicable federal, state and local nondiscrimination laws. No questions on this application are intended to secure information to be used for such discrimination.

By signing your name below, you acknowledge and certify:

- that all statements made by me on this application are true and complete to the best of my knowledge.
- that I have withheld nothing that would affect this application unfavorably.
- that any offer I may receive from the Company is contingent upon my successful completion of the Company's total preemployment screening process.
- that I understand that misrepresentations or omissions may be cause for rejection, or may be cause for subsequent dismissal if I am hired.

I also understand that nothing contained in this application or in the interview process is intended to create an employment contract between the Company and myself. Should this application result in my employment, it will be an at-will relationship. I have a right to terminate my employment at any time and for any reason and the Company retains the same right. I agree to conform to the rules and regulations of the Company. I further understand that no person of the Company other than the Attorney/owner has any authority to enter into any agreement with me for any specified period of time or to guarantee some other benefit above the normal employee benefit package.

I further understand this entire statement applies to the period prior to, or after, I may be employed.

I understand that past employers/educational institutions and/or the military will be contacted for references and I authorize any such organization to provide the requested information. I further release and forever discharge the Company, its agents, its employees, and the individuals and companies contacted by this Company as part of its inquiries and investigations, from any and all claims, demands, damages, actions, causes of action, or suits of any kind or nature whatsoever arising from the Company's inquiries and investigation of my credentials and information in connection with my application.

I hereby acknowledge that I have read and understand each of the above statements. I authorize release of information about me to this Company.

Signature of Applicant _____

Date _____

PRINT NAME of Applicant _____

FOR INTERNAL USE ONLY

To be completed AFTER applicant is hired.

Part-Time \$ _____ Per _____ Date Employed _____ Job Title _____

Full-Time \$ _____ Per _____ Department _____ Employee Number _____

Work Schedule _____