



CORPORATE OFFICE:
 2455 CENTURY ROAD
 GREEN BAY, WI 54307-0097
 920-494-4744

APPLICATION FOR EMPLOYMENT

COMPLETE DISTRIBUTORS OF LUMBER AND BUILDING SPECIALTIES

Amerhart is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, disability, age, sexual orientation, gender identity, national origin, veteran status, genetic information or any other classification protected by federal, state, or local laws and ordinances.

PERSONAL INFORMATION

DATE: _____

NAME: _____

PRESENT ADDRESS: _____
CITY STATE ZIP

PHONE NUMBER: _____ EMAIL: _____

Are you at least 18 years old? Yes No Are you legally authorized to work in the U.S.? Yes No

Will you now or in the future require sponsoring or employment visa statuses (e.g. H-1B visa status)? Yes No

EMPLOYMENT INFORMATION

POSITION DESIRED: _____ PART TIME FULL TIME

DATE YOU CAN START: _____ SALARY DESIRED: _____

ARE YOU PRESENTLY EMPLOYED? _____

IF EMPLOYED, MAY WE CONTACT YOUR EMPLOYER? _____

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? _____

DO YOU CURRENTLY HOLD A VALID COMMERCIAL DRIVERS LICENSE? _____

LICENSE NUMBER: _____ STATE: _____ EXPIRATION DATE: _____

ENDORSEMENTS: _____ DATE OF LAST D.O.T. PHYSICAL: _____

COMMERCIAL DRIVERS LICENSE CLASS: A B

EDUCATION

NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	GRADUATED YES/NO	SUBJECTS STUDIED

EMPLOYMENT HISTORY: PLEASE LIST FOR THE PAST 10 YEARS STARTING WITH MOST RECENT EMPLOYER.

Employer Name and Address	Dates	Position	Reason For
	FROM		
	TO		
	FROM		
	TO		
	FROM		
	TO		

REFERENCES: PLEASE LIST 3 PERSONS, NOT RELATED TO YOU, WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR.

Name and Address	Business	Contact Number	Years Acquainted

WERE YOU REFERRED BY ANYONE? _____ IF YES, BY WHOM? _____

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for discipline up to and including termination. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

SIGNATURE

DATE