Shaw Builders, Inc.

3185 Deer Point Drive Stoughton, WI 53589 608-873-3008

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Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

| Personal Information Email address: | | | |
|---|---|--|--|
| Name: | Today's Date: / / | | |
| Home Address: | Home Phone: () | | |
| City, State, Zip: | Cell Phone: () | | |
| Social Security Number: | Work Phone: () | | |
| Are you legally eligible for employment in the United States? Yes No | Pay Expected | | |
| you ever applied for employment with us? No If yes: Month and Year When will you be able to begin work | | | |
| Apart from absence for religious observance, are you available for full-time work? Yes, No If not, what hours can you work? | Will you work overtime if asked? Yes No | | |
| If you are under 18 years of age, can you provide required proof of your eligibility to work? | Yes No | | |
| Are you currently employed? | Yes No | | |
| May we contact your present employer? | Yes No | | |
| Can you travel if a job requires it? | Yes No | | |
| Are you currently on "lay-off" status and subject to recall? | Yes No | | |
| Position Desired: Referred By | Referred By: | | |
| Have you ever been convicted of a felony within the past seven years? Yes No If Yes, please explain: | | | |
| Conviction will not necessarily disqualify an applicant from em | ployment | | |
| | | | |

| Education | | | | |
|-------------------------------|-----------------|---------------------|--|--|
| School and Address | Course of Study | Graduation | | |
| High School Name: | | Graduate: yes / no | | |
| City, State: | | No. Years Attended: | | |
| Business or Technical School: | | Graduate: yes / no | | |
| City, State: | | No. Years Attended: | | |
| Undergraduate School: | | Graduate: yes / no | | |
| City, State: | | No. Years Attended: | | |

| | Expe | erience | | |
|---|---------------------------------------|---|---|--|
| Name: | Date: | | | |
| No. Years In Carpentry: | | I would Prefer to: Trim | Frame Do Both | |
| Frame Walls: | Yes / No / Some | Hang Doors: | Yes / No / Some | |
| Frame Floor Systems: | Yes / No / Some | Install Base & Casing: | Yes / No / Some | |
| Cut Rafters: | Yes / No / Some | Install Hardware: Y | - | |
| Frame Stairs: | Yes / No / Some | Door Closures: Yes / No / Some | | |
| Read Blueprints: Yes / | No / Some | Bathroom Partitions: | Yes / No / Some | |
| Run a Crew: | Yes / No / Some | Trim Custom Stairs: | Yes / No / Some | |
| Operate Forklift: | Yes / No / Some | Install Crown Molding: | Yes / No / Some | |
| Use Air Tools: | Yes / No / Some | Install Counter tops: | Yes / No / Some | |
| | □ man la | | | |
| | Empio | oyment | <u> </u> | |
| Company Name: | | Telephone | | |
| Address: | | | Employed - (State Month and year) From To | |
| Name of Supervisor: | | | Weekly Pay Start Finish | |
| State Job Title and describe your work: | | | Reason for leaving | |
| Company Name: | | | Telephone | |
| Address: | | | Employed - (State Month and year) From To | |
| Name of Supervisor: | | | Weekly Pay Start Finish | |
| State Job Title and describe your work: | | | Reason for leaving | |
| Company Name: | | | Telephone | |
| Address: | | Employed - (State Month and year) From To | | |
| Name of Supervisor: | | | Weekly Pay Start Finish | |
| State Job Title and describe your work: | | | Reason for leaving | |
| We may contact the employers listed above unless you indicate those you do not want us to contact | | DO NOT CONTACT | | |
| | Employer Number(s)Reas | son | | |
| | <u> </u> | | | |
| | Sign | ature | | |
| The information provided in this Applica application may result in my dismissal. | ation for Employment is true, correct | t, and complete. If employed, any r | misstatement or omission of fact on this | |
| I understand that acceptance of an offe future. | r of employment does not create a | contractual obligation upon the em | ployer to continue to employ me in the | |
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