 **APPLICATION FOR EMPLOYMENT**

This is an application for the employment at S Superior Siding Inc. Please take your time to complete fill this form out and use LEGIABLE hand writing. Fill out professionally.

Do you have a driver’s license? Yes No

Do you have a personal vehicle? Yes No

**If no to either of these please speak with Administrator.**

Have you ever done any Siding, Windows, Gutters, or Roofing in the past?

|  |
| --- |
|  |

|  |
| --- |
| Applicant Information |

If So Explain.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Last Name | | First | | | | M.I. |
| Street Address | | | | | | Apartment/Unit# |
| City | | State | | | ZIP | |
| Phone | | | E-mail | | | |
| Position applying for | | | | | | |
| Are You: | Authorized to work in the US? Yes No | | | Age | | |
| Have you ever worked for this company before? Yes No When? | | | | | | |

Please see back.

|  |  |  |  |
| --- | --- | --- | --- |
| Previous Employment | | | |
| Company | | | Phone |
| Address | | Supervisor | |
| Position Title | From:  To: | | Reason for leaving |
| Skills Used | | | |
| May we contact your previous supervisor for a reference? Yes No | | | |

Table

Description automatically generated

|  |  |
| --- | --- |
| Disclaimer and Signature | |
| I certify that the information on this application and its supporting documents is accurate and complete. I understand, and agree that failure to fully complete the form,  or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a  later date. I authorize the employer to investigate and verify all statements contained in this application and supporting materials. | |
| Signature | Date |