



APPLICATION FOR EMPLOYMENT

Position(s) Applied For: _____ Today's Date: _____
Employment Desired: FULL-TIME PART-TIME OTHER _____ Start Date: _____
Availability: _____

PERSONAL INFORMATION

Name _____
Last First Middle Maiden

Present address: _____
Number Street City State Zip

Telephone: _____ E-mail: _____ DOB: _____

APPLICATION QUESTIONNAIRE

Are you currently employed? YES NO

May we contact your present employer? YES NO

Did you complete this application yourself? YES NO

If not, who assisted? _____

Have you ever been convicted of a felony? YES NO

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Have you ever been employed with this company? YES NO

If so, when? _____

Do you have any friends or relatives employed by this company? YES NO

If so, please provide their names and relationship to you.

EDUCATION

TYPE OF SCHOOL	SCHOOL NAME LOCATION	QUALIFICATION(S)	MAJOR/SPECIALIZATION	YEARS COMPLETED
HIGH SCHOOL				
COLLEGE/ UNIVERSITY				



EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. (Attach additional sheets if necessary).

Name of Employer 1: _____	Start Date: _____
Employer Address: _____	End Date: _____
Employer Phone: _____	Starting Pay: _____
Last Supervisor's Name: _____	Final Pay: _____
Reason for Leaving: _____	Your Job Title: _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of Employer 2: _____	Start Date: _____
Employer Address: _____	End Date: _____
Employer Phone: _____	Starting Pay: _____
Last Supervisor's Name: _____	Final Pay: _____
Reason for Leaving: _____	Your Job Title: _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of Employer 3: _____	Start Date: _____
Employer Address: _____	End Date: _____
Employer Phone: _____	Starting Pay: _____
Last Supervisor's Name: _____	Final Pay: _____
Reason for Leaving: _____	Your Job Title: _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.



REFERENCES

Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years.

Name of Reference 1: _____	Occupation: _____
Company Name: _____	Years Known: _____
Company Address: _____	Reference Phone: _____
Reference Email: _____	

Name of Reference 2: _____	Occupation: _____
Company Name: _____	Years Known: _____
Company Address: _____	Reference Phone: _____
Reference Email: _____	

Name of Reference 3: _____	Occupation: _____
Company Name: _____	Years Known: _____
Company Address: _____	Reference Phone: _____
Reference Email: _____	

APPLICATION FORM WAIVER [READ CAREFULLY]

In exchange for the consideration of my job application by Well Bilt Industries USA, LLC (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of WBI, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature: _____

Print Name: _____

Date: _____