

EMPLOYMENT APPLICATION

1. EMPLOYER INFORMATION

LAKESHORE PALLET LLC
931 Millersville Ave
Howards Grove, WI 53083
Phone: 920-565-3331

It is the policy of Lakeshore Pallet, LLC to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

2. APPLICANT INFORMATION

Applicant Name: _____

Address: _____

City/State/ Zip: _____

Number of years at this address: _____

Daytime Phone: _____ Evening Phone: _____

Driver's License (State/Number): _____

3. EMERGENCY CONTACT: Who should be contacted if you are involved in an emergency?

Contact Name: _____

Relationship to you: _____

Address: _____

City/State/Zip: _____

Daytime Phone: _____ Evening Phone: _____

4. JOB POSITION applied for:

5. Who referred you to our company? _____

6. Are you at least 18 years old? _____ Yes _____ No

7. How will you get to work? _____

8. If applicable, are you available to work overtime? ____ Yes ____ No
9. If you are offered employment, when would you be available to begin work?
- _____

10. **APPLICANTS SKILLS**

Check those skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience and circle the number which corresponds to your ability for each skill. (One represents poor ability, while five represents exceptional ability.)

SKILL	YRS. OF EXPERIENCE	ABILITY RATING
[] Microsoft Office Suite (Word, Excel, etc.) _____		1 2 3 4 5
[] Customer Service _____		1 2 3 4 5
[] Power saw, Nailers, etc. _____		1 2 3 4 5
[] Forklift Training _____		1 2 3 4 5
Other: _____		1 2 3 4 5
_____		1 2 3 4 5

11. **APPLICANT EMPLOYMENT HISTORY** List your current or most recent employment first.

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/Zip: _____

Job Duties: _____

Reason for leaving: _____

Dates of Employment (month/year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/Zip: _____

Job Duties: _____

Reason for leaving: _____

Dates of Employment (month/year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/Zip: _____

Job Duties: _____

Reason for leaving: _____

Dates of Employment (month/year): _____

12. APPLICANTS' EDUCATION AND TRAINING

College/University Name and Address:

Did you receive a degree? ___ Yes ___ No If yes, degree received _____

High School/GED Name and Address

Did you receive a degree? ___ Yes ___ No

Other Training (graduate, technical, vocational):

Awards, Honors, Special Achievements:

Military Service: ___ Yes ___ No

Branch: _____

Specialized Training: _____

13. REFERENCES: List any two people who would be willing to provide a reference for you.

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Relationship: _____

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Relationship: _____

14. Please provide any other information that you believe should be considered:

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Lakeshore Pallet, LLC to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to communicate information fully and freely regarding my previous employment, attendance, and grades. I authorize those persons designated as references to communicate information fully and freely regarding my previous employment and education.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE

DATE