

## **Application for Employment**

Please complete entire application and return to MID-SOUTH LUMBER AND SUPPLY, INC. 107 Emmett Ave, Bowling Green KY 42101

Fax (270) 781-2989 or Email hrmsl@midsouthlumber.com

PERSONAL INFORMATION: (Please type or print)			
Full Legal Name	Name you would like us to	call you	
Present Street Address	E-mail Address		
City, State, Zip Code	Person to Contact in an Em	nergency	
Telephone Number(s)	Telephone Number of Emer	rgency Contact	,
Have you ever been employed by MID-SOUTH LUMBER AND SUPPLY, INC	)?	Yes	No
Do you have any relatives or members of your household working for MID-So If "yes," list the names of the employees and your relationship to them. (Answering "yes" will not disqualify you from employment. Information receive making placement decisions.)			No in
Are you at least 18 years of age?	_	Yes	No
Do you have a valid driver's license?  (Answering "no" will not bar you from consideration for employment for non-own what class of driver's license do you hold? C (Standard)	lriver positions.) C (CDL w/out Air Brakes)	Yes C (CDL w/Air B	No Brakes)
B (CDL w/out Air Brakes)	B (CDL w/Air Brakes)	A (CDL)	·
Driver's License State & Number & Expiration Date	Endorsement (i.e. Hazard	dous Materials)	
Are you legally eligible for employment in the United States?		Yes	No
Are you able to perform the essential functions of the job as outlined on the joe either with or without reasonable accommodations?	ob description for the position for	r which you are ap Yes	plying No
Have you been convicted of a felony? If "yes" explain below. (Conviction of a with MID-SOUTH LUMBER AND SUPPLY, INC.)	crime will not automatically bar	you from employm Yes	nent No
Are you awaiting prosecution for any crime, excluding minor traffic violations	? If "yes" explain below.	Yes	No

EMPLOYMENT DESIRED:				
Position (Please be specific)	Date a	vailable for employ	ment	_
Are you available to work (you may mark more than one):	Full-time?	Over-time?	Part-time?	

MID-SOUTH LUMBER AND SUPPLY, INC IS AN EQUAL OPPORTUNITY EMPLOYER COMMITTED TO A POLICY OF NON-DISCRIMINATION IN EMPLOYMENT ON ANY BASIS INCLUDING RACE, COLOR, ANCESTRY, GENDER, AGE, RELIGION, MARITAL, VETERAN OR CITIZENSHIP STATUS, SEXUAL ORIENTATION, NATIONAL ORIGIN, THE PRESENCE OF ANY SENSORY, MENTAL OR PHYSICAL, OR ANY OTHER BASIS PROHIBITED BY LOCAL STATE, OR FEDERAL LAW. APPLICANTS MAY REQUEST A REASONABLE ACCOMMODATION AT ANY POINT IN THE EMPLOYMENT PROCESS. MID-SOUTH LUMBER AND SUPPLY, INC IS A DRUG FREE WORKPLACE AND PRE-EMPLOYMENT DRUG TESTING IS REQUIRED.

	ist name of learning institution ach level of education.	n, course of stu	dy (where applicable) an	nd indicate highest grade level
Last High Schoo	ol Attended	Highest Grac	de Level Completed Indic	cate: Still Attending, GED, Diploma
Trade or Vocation	onal School, Course of Study	Highest Gra	ade Level Completed Ind	dicate: Graduated, Certified
College/Universi	sity, Course of Study	Highest Gra	ade Level Completed Ind	dicate: Degree earned
Post College, Co	ourse of Study	Highest Gra	ade Level Completed Ind	dicate: Degree awarded
REFERENCES:	: List three non-relatives who a	are familiar with	n your qualifications, wor	k history and ability.
Name	How do you know this	is person?	Years Known	Telephone Number(s)
Name	How do you know this	is person?	Years Known	Telephone Number(s)
Name	How do you know this	is person?	Years Known	Telephone Number(s)
SPECIAL SKILLS, QUALIFICATIONS & CONSIDERATIONS: (i.e. public service, ability to operate office and/or yard equipment, knowledge of building materials, construction techniques, demonstrated leadership and management skills)				
Describe a specific situation where you have provided excellent customer service in your most recent position.				

EMPLOYMENT EXPERIENCE	: List your last four jobs.	List your present or last job first. Do not omit any job. Include military service.
Are you currently employed?	Yes No	May we contact your present employer? Yes No
Employer		Supervisor's Name
Address		Employed From (Month/Year) To (Month/Year)
Telephone Number	Starting Wage/Sala	ary Ending Wage/Salary
Position	Duties Performed	
What did you like most about y	our job?	
What did you like least about y	our job?	
Reason for Leaving		

EMPLOYMENT EXPERIENCE:		
Employer		Supervisor's Name
Address		Employed From (Month/Year) To (Month/Year)
Telephone Number	Starting Wage/Salary	Ending Wage/Salary
Position	Duties Performed	
What did you like most about your job?		
What did you like least about your job?		
Reason for Leaving		

EMPLOYMENT EXPERIENCE:		
Employer		Supervisor's Name
		·
Address		Employed From (Month/Year) To (Month/Year)
Telephone Number	Starting Wage/Salary	Ending Wage/Salary
Position	Duties Performed	
What did you like most ab	oout your job?	
What did you like least ab	out your job?	
Reason for Leaving		

EMPLOYMENT EXPERIE	ENCE:	
Employer		Supervisor's Name
Address		Employed From (Month/Year) To (Month/Year)
Telephone Number	Starting Wage/Salary	Ending Wage/Salary
Position	Duties Performed	
What did you like most ab	out your job?	
What did you like least ab	out your job?	
Reason for Leaving		

**EMPLOYMENT UNDERSTANDING:** Read the following statements carefully before signing this application. Only those applications that are signed and dated are considered valid. If you have any questions regarding this statement, please speak to a Human Resources representative of MID-SOUTH LUMBER AND SUPPLY, INC.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information or omission will be grounds for rejection of my application or I may be subject to immediate termination if discovered after I am employed. I understand, acknowledge and authorize MID-SOUTH LUMBER AND SUPPLY, INC to make inquiry of and contact any of the persons or organizations named in this application and I authorize any of the persons, organizations or institutions named in this application or in any other documents provided to you to give you complete information and records that may be required to make a hiring decision.

I also understand that my employment will be subject to the satisfactory results of any pre-employment examination required by MID-SOUTH LUMBER AND SUPPLY, INC and I hereby consent to any such check including a criminal background investigation or records maintained by law enforcement agencies as well as an investigation of my credit history. I also hereby consent to a pre-employment mandatory test to detect drug usage. Applicants who test positive on drug screening will not be considered for employment. I also understand that if a job offer is made, depending on the position, it will be contingent upon the successful passing of a physical exam and/or a physical capacity test. Further, I understand that if I am hired for a sales or management position, or am promoted into such a position in the future, I will be asked to sign a confidentiality and/or non-compete agreement prior to the inception of my employment. I agree to conform to all rules and regulations of MID-SOUTH LUMBER AND SUPPLY, INC as they presently exist or are later modified. I recognize that if I am hired, my employment is for no definite period of time, and can be terminated at the discretion of the company or at my option, with or without notice, at any time, and for any reason or no reason at all.

I also understand that no representative of MID-SOUTH LUMBER AND SUPPLY, INC has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits or terms and conditions of employment except as specifically set forth in writing in a current individual employment agreement signed by the CEO or CFO of MID-SOUTH LUMBER AND SUPPLY, INC.

I understand this application is valid for only ninety (90) days from the date I sign it. If I want to be considered for job openings more than ninety (90) days from the date I sign the application, I must submit a new application.

In the event of employment, I understand that any drug screen and/or physical expenses incurred by MID-SOUTH LUMBER AND SUPPLY INC on behalf of the Employee are the Employee's responsibility if the Employee voluntarily terminates employment within 30 days of hire date. By signing below, I understand and authorize any drug screen and/or physical expenses to be withheld from the final payroll check in the event of employment.

By signing below, I certify that I have read, understand and agree to the terms of the above employment understanding.

Signature of Applicant \_\_\_\_\_\_ Date \_\_\_\_\_

FOR USE BY MID-SOUTH LUMBER AND SUPPLY, INC			
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Neatness	Attitude	Personality	Ability
Interviewed By		Interview Date	
Yard/Department	Salary/Wages	Job Classification	Employee Number
Date Will Report to New I	Employee Orientation	Human Resources Authori	ization Code
Signature of Hiring Manag	ger & Date	Signature of Human Resou	urces Manager & Date

## AUTHORIZATION TO OBTAIN CONSUMER REPORT PURSUANT TO 15 U.S.C. §1681b(b)(2)(B)

I authorize MID-SOUTH LUMBER AND SUPPLY, INC to obtain a consumer report for employment purposes. I understand that an inquiry may include, but is not limited to: criminal records, motor vehicle records, credit records, address verification, social security verification, civil court records, bankruptcy records, personal or professional references, education verification, and copies of prior personnel files. An inquiry may be made as part of a pre-employment screening process as well as at any time during the course of employment. No additional notice or authorization shall be needed for future inquiries and to obtain additional consumer reports.

I understand the use of my date of birth is for identification purposes only and that MID-SOUTH LUMBER AND SUPPLY, INC is an equal opportunity employer. Prospective employees will receive consideration without regard to age, race, color, religion, sex, national origin, sexual orientation, disability or veteran status.

This authorization and disclosure is presented pursuant to the Fair Credit Reporting Act, 15 U.S.C. §1681b(b)(2)(B) and any applicable state laws.

Date:	
Traine of Additionaling Container.	(Please Print)
Social Security Number:	<del></del>
Date of Birth://	
Driver's License:	
Signature of Authorizing Consun	ner: