

Employment Application PERSONAL INFORMATION — Complete all applicable information

| Name (Last, First, MI): | | | | | |
|--|--|--|-------------|--|--|
| Position applied for: | Are you able to work: Full Time Part Time Temporary Weekends Evenings Nights | | | | |
| Street Address: | City: | State: | Zip: | | |
| Primary Phone: | Secondary Phone: | Have you previously been employed by our company? Yes No Last Date Worked/Where? | | | |
| Are you legally authorized t Yes No Require S | to work in the United States? ponsorship | When could you start employment? | | | |
| Have you ever applied for e When? | employment with our company? Yes Where? | No | | | |
| Are you related to anyone of If yes, name and relationsh | currently or previously employed by our ip? | company? Yes | No | | |
| | nclude your last seven (7) years of emplo n the most recent and working backward onsideration. | | | | |
| Present or Last Position: | Name of Company: | From Mo/Yr: | To Mo/Yr: | | |
| Street Address: | City: | State: | Zip: | | |
| Reason for Leaving: | Summary of Duties: | | | | |
| Starting Annual Salary: | Final Annual Salary: | Bonus: | Commission: | | |
| Name of Supervisor: | Supervisor Title and Department: | Supervisor Phone Number: () - extn May we contact: Yes No | | | |



Graduate School:

Other:

| Present or Last Position: | | Name of Company: | | | From Mo/Yr: To Mo/ | | Yr: | |
|---------------------------|------------|----------------------------------|----------------------------------|--|--------------------------------|---|---------|--|
| Street Address: | | City: | | | State: | Zip: | | |
| Reason for Leaving: | | Summary of Duties: | | | | | | |
| Starting Annual Salary: | | Final Annual Salary: | | | Bonus: Commission | | ssion: | |
| Name of Supervisor: | upervisor: | | Supervisor Title and Department: | | | Supervisor Phone Number: () - extn May we contact: Yes No | | |
| | | | | | | | | |
| Present or Last Position: | | Name of Company: | | | From Mo/Yr: | To Mo/ | Yr: | |
| Street Address: | | City: | | | State: | Zip: | | |
| Reason for Leaving: | | Summary of Duties: | | | | | | |
| Starting Annual Salary: | | Final Annual Salary: | | | Bonus: | Commis | ssion: | |
| Name of Supervisor: | | Supervisor Title and Department: | | Supervisor Phone Number: () - extn May we contact: Yes No | | | | |
| EDUCATION INFORMATION | | | | | | | | |
| High School: | City | y: | St: | Diploma/ GED: | General Ed. or Advanced Classe | | lasses: | |
| College: | City | y: | St: | Degree: | Major: | | GPA: | |

St:

St:

City:

City:

Degree:

Degree:

Major:

Major:

GPA:

GPA:



Signature

| Relevant skills, certifications, and licensure: | | | | | | |
|--|--|--|--|--|--|--|
| neteralit skitts, Certifications, and ticensure. | | | | | | |
| | | | | | | |
| Rate your computer proficiency: | | | | | | |
| () words p/m or () keystrokes p/m | | | | | | |
| MS Word Skills Beg Interm Advanced Years Utilized: | | | | | | |
| MS Excel Skills Beg Interm Advanced Years Utilized: | | | | | | |
| MS PowerPoint Beg Interm Advanced Years Utilized: MS Access Beg Interm Advanced Years Utilized: | | | | | | |
| nie neeess seg interim navaneed rears canzea | | | | | | |
| Define other computer software programs of proficiency? | | | | | | |
| | | | | | | |
| | | | | | | |
| PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY | | | | | | |
| SVB Wood Floors is an equal opportunity employer. SVB Wood Floors does not discriminate in employment | | | | | | |
| on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, gender, sexual | | | | | | |
| orientation, marital status, physical or mental disability, military status or unfavorable discharge from | | | | | | |
| military service. | | | | | | |
| I understand that neither the completion of this application nor any other part of my consideration for | | | | | | |
| employment creates any obligation for SVB Wood Floors to hire me. If I am hired, I understand that either | | | | | | |
| SVB Wood Floors or I can terminate my employment at any time and for any lawful reason, with or without | | | | | | |
| cause and without prior notice. I understand that no representative of SVB Wood Floors has the authority | | | | | | |
| to make any assurance to the contrary. | | | | | | |
| | | | | | | |
| attest with my signature below that I have given to SVB Wood Floors true and complete information on | | | | | | |
| this application. No requested information has been concealed. I also understand that SVB Wood Floors ma | | | | | | |
| request to contact references provided for employment reference checks, and under consistent hiring | | | | | | |
| practices, may require pre-employment screening and background verification as a condition of | | | | | | |
| employment upon any employment offer. If any information I have provided is untrue, or if I have | | | | | | |
| concealed material information, I understand that this will constitute cause for the denial of employment | | | | | | |
| or immediate dismissal. | | | | | | |
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| | | | | | | |
| | | | | | | |

Date