



EMPLOYMENT APPLICATION

(NEVILLE IS AN EQUAL OPPORTUNITY EMPLOYER)

FULL NAME: _____ DATE: _____

ADDRESS: _____

1ST SHIFT _____

2ND SHIFT _____

PHONE #: (H) _____ (C) _____

PLEASE CHECK YES OR NO TO THE FOLLOWING QUESTIONS:

- 1) ARE YOU A CITIZEN OF THE UNITED STATES? (YES) _____ (NO) _____
A. IF NO, ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES? (YES) _____ (NO) _____
- 2) HAVE YOU EVER WORKED FOR NEVILLE? (YES) _____ (NO) _____
A. IF YES, WHEN? _____
- 3) DO YOU HAVE RELIABLE TRANSPORTATION? (YES) _____ (NO) _____
- 4) DO YOU HAVE ANY RESTRICTIONS WHICH WOULD PREVENT YOU FROM PERFORMING YOUR DUTIES AT NEVILLE? (YES) _____ (NO) _____
- 5) DO YOU HAVE ANY EXPERIENCE IN THE WOODWORKING/CARPENTRY INDUSTRY? (YES) _____ (NO) _____
A. IF YES, WHAT TYPE OF EXPERIENCE AND FOR HOW LONG? _____

PLEASE LIST 3 OR MORE WORK REFERENCES. PHONE NUMBERS OF CONTACTS SHOULD BE LISTED.

COMPANY NAME: _____ CONTACT NAME: _____

EMPLOYMENT DATES: _____ CONTACT PHONE #: _____

COMPANY ADDRESS: _____

COMPANY NAME: _____ CONTACT NAME: _____

EMPLOYMENT DATES: _____ CONTACT PHONE #: _____

COMPANY ADDRESS: _____

COMPANY NAME: _____ CONTACT NAME: _____

EMPLOYMENT DATES: _____ CONTACT PHONE #: _____

COMPANY ADDRESS: _____

COMPANY NAME: _____ CONTACT NAME: _____

EMPLOYMENT DATES: _____ CONTACT PHONE #: _____

COMPANY ADDRESS: _____

ADDITIONAL COMMENTS/NOTES:

SIGNATURE: _____ DATE: _____

PLEASE EMAIL COMPLETED FORM TO: Hiring@nevillelumber.com