

# Lincoln Davies Building Supply



## Employment Application

Select the location for the position you're applying to

<b>Sauquoit</b> 8689 Summit Road Sauquoit, NY, 13456 Phone: 315-839-5740	<b>Forestport</b> 11847 Woodhull Road Forestport, NY, 13338 Phone: 315-392-4021	<b>Design Showroom</b> 225 Clinton Road New Hartford, NY, 13413 Phone: 315-401-6584

### Personal Data

Name:				Date:	
Street Address:					
City:			State:		Zip:
Phone #:	Mobile	Home	Work	Are you a Veteran?	Yes No
Level of Education Completed:	High School	Trade School	College	Graduate	Other
Professional Organizations:					
If under 18, please list age:	Do you have a driver's license:			Yes	No
Drivers License Number:				Issued in What State:	
Accidents during the past three years?	Yes	No	How Many:		
Moving violations during the past 3 years?	Yes	No	How Many:		
Are you legally eligible to work in the US?	Yes	No			
If selected for employment are you willing to submit to a background check?				Yes	No
Have you been convicted of a felony? (Conviction will not necessarily disqualify an applicant from employment)					
Yes	No	If yes, please explain:			

**Position**

Position Applying For:				Available Start Date:		
Availability:	Full Time	Part Time	Status:	Regular	Temporary	Seasonal
Shift:	Days	Evenings	Shift:	Graveyard	Swing	Weekends
Desired Pay:	Will you work overtime?		Yes	No		

**Education**

School Name	Location	Degree Received	Major

List any special skills or experiences that you feel would help you in the position that you are applying for.

**Work History**

<b>Job Title:</b>		Start Date:	End Date:
Company Name:		Supervisors Name:	
City:		State:	Zip:
Phone #:	Starting Salary:	Ending Salary:	
Duties:			
Reason for Leaving:			
May we contact your present employer?		Yes	No
<b>Job Title:</b>		Start Date:	End Date:
Company Name:		Supervisors Name:	
City:		State:	Zip:
Phone #:	Starting Salary:	Ending Salary:	
Duties:			
Reason for Leaving:			
<b>Job Title:</b>		Start Date:	End Date:
Company Name:		Supervisors Name:	
City:		State:	Zip:

Phone #:	Starting Salary:	Ending Salary:
Duties:		
Reason for Leaving:		
<b>Job Title:</b>	Start Date:	End Date:
Company Name:	Supervisors Name:	
City:	State:	Zip:
Phone #:	Starting Salary:	Ending Salary:
Duties:		
Reason for Leaving:		

**References**

Name	Phone	Relationship to You

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date