Application for Employment

Statement of Values

Superior Quality Fence mission is to manufacture the finest quality products in the fencing industry. We built our reputation a quality product, customer service, cost controls and treating our employees like family. We believe that our reputation and employees are our most important resources and our success depends upon retaining a staff capable of delivering an exceptional product to every customer every time/

Dear Applicant:

Welcome to Superior Quality Fence. Prior to completing the application for employment, please understand that we are serious about creating a productive working environment for our staff and maintaining the highest levels of quality, service and attention for our customers.

We want you to understand that we also believe in living our values, some of which are:

- We believe that good isn't good enough.
- We believe in doing business in a professional and orderly manner.
- We believe in honesty and integrity.
- We believe that only a happy and professional staff can give the level of personal service we demand.
- We believe in the ongoing training and development of our staff and see it as a worthy investment in the future of the company.
- We believe in providing legendary service the unique and powerful sort of personal care and attention that our guests tell stories about.
- We believe that everyone is capable of being an A+ player.

If this feels like an environment for you, please complete the application.

Superior Quality Fence - Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

** PLEASE PRINT CLEARLY **

Position(s) applied for		Date /	
How did you find out about this job?	☐ Newspaper ☐ Employee ☐ Wall	k-in □ Relative □ Other	
Why are you seeking a new job at this	s time?		
Applicant Informati	on		
First Name	Middle	Last	
Street Address	Social Sec	eurity No	
City/State/Zip		Phone ()	
If hired, do you have a reliable means	of transportation to get to work?	Describe	
Are you legally eligible for employmed Have you been convicted of a crime?	ent in the U.S.? (Proof of U.S.	n you furnish a work permit?	red.)
		rom To	
Employment Inform	ation		
Are you seeking full time, part time or	r temporary employment?		
What hours and shift(s) would you pro	efer to work?		
List times you are not available to wo	rk?		
Are you willing to work overtime?	Weekends? Holida	ays?	
Are you currently employed?	If hired, when would you be able	to start?	
Have you ever worked for this organize	zation before? If yes, name	e used:	
List any friends or relatives employed	by this company:		
Have you ever been discharged or ask	ed to resign from any position?	If yes, please describe:	
tasks with or without reasonable accor	mmodation? Please describe wh	which you are applying. Are you able to perform al nich tasks, if any, you will need accommodation to	these
Please describe:			

	atary: 1 2 3 4 5 6 7 8	-		College: 1 2 3 4 5 6 7 8	
	of School:			Name of School:	
	on of School:			Location of School:	
n hi	gh school, are you enrolled in a reco	ognized co-op program?	Yes □ No	Degree & Major:	
yes, i	identify program and school:			Minor:	
۷o	rk History (please begin w	rith most recent)			
1.	Company		Phone No. with A	Area Code ()	
	Address		City/State/Zip	City/State/Zip	
	Dates of Employment: From	To	Salary: Beginnir	ng Ending	
	Job Title		Supervisor's Name & Title		
	Describe duties briefly:				
	Specific reason for leaving:				
2.	Company		Phone No. with A	Area Code ()	
	Address		City/State/Zip		
	Dates of Employment: From	To	Salary: Beginning Ending		
	Job Title		Supervisor's Name & Title		
	Describe duties briefly:				
	Specific reason for leaving:				
3.	Company		Phone No. with A	Area Code ()	
	Dates of Employment: From	To	Salary: Beginnir	ng Ending	
			Supervisor's Name & Title		
	Describe duties briefly:				
	Specific reason for leaving:				
4.				Area Code ()	
				7 . II	
				Ending	
				ne & Title	
	Describe duties briefly:				
	Specific reason for leaving:				

Authorizations & At-Will Employment Agreement

(please read carefully, then sign and date below)

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification form my dismissal from employment if discovered at a later date. I agree to immediately notify this company if I should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter.

AT-WILL EMPLOYMENT AGREEMENT

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at any time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature	Date	
-		
Name (please print)		