WILSON LUMBER COMPANY, INC.

Employment Application

Your interest in our Company is appreciated. We provide equal employment opportunity without discrimination on the basis of race, color, religion, sex, age, disability, national origin, status as a veteran, military membership, or any other characteristic protected by state, federal, or local law. Applicants requiring reasonable accommodation in the application and job interview process should let us know of such need. Applications are considered current for three (3) months. If you have not been hired within three (3) months from the date of your application, you must re-file to be considered for employment. Any offer of employment is contingent on a drug screening test.

APPLICANT INFORMATION						
Last Name	First		M.I.	Date		
Street Address						
City	State	ZIP	E-mail			
Home Phone . .	Cell Phone . .		Referred by			
Position(s) Applied for	☐ Full Time ☐ Part Time ☐ Temporary ☐ As Needed					
Preferred Locations: ☐ CBS (Truss), Madison ☐ Huntsville Store/Yard ☐ Madison Showroom/Yard ☐ Millwork, Huntsville						
Veteran U.S. Military?	YES ☐	NO ☐	If yes, what Branch?	Dates of Service From To		
Rank at Discharge:	Type of Discharge	If other than honorable, explain:	Can you if hired submit proof of your legal right to work in U.S.?	YES ☐	NO ☐	
Are you at least 18 years of age?	☐ YES	☐ NO	If no, do you have a work permit?	YES ☐	NO ☐	
Have you ever worked for this company?	☐ YES	☐ NO	If yes, when			
Name friends or relatives who work here.						
Do you have a valid driver's license?	☐ YES	☐ NO	State	Number	Type	Expire Date
Are you presently charged with, or have you ever plead guilty, no contest, been given deferred adjudication, or been found guilty of a felony or misdemeanor? NOTE: *Motor vehicle citations occurring more than five years ago need not be referenced. Conviction of a felony or misdemeanor will not automatically bar employment.*				☐ YES	☐ NO	
If yes, explain						

EDUCATION	Name and Location of School	Years Completed	Major / Course(s)	Graduated?	
High School				☐ Diploma	☐ GED
Vocational/Trade				☐ Degree _____	
College				☐ Degree _____	
Graduate				☐ Degree _____	
Skills, qualifications, training:					

PREVIOUS EMPLOYMENT (Beginning with most recent)			
1. Company Name	Location (Address)	Dates of Employment: From To	
Type of Business	Supervisor's Name	Telephone . .	Still Working Here? ☐ YES ☐ No
Job Title	Reason for Leaving		
Responsibilities			

2. Company Name	Location (Address)	Dates of Employment: From To
Type of Business	Supervisor's Name	Telephone . .
Job Title	Reason for Leaving	
Responsibilities		

3. Company Name	Location (Address)	Dates of Employment: From To
Type of Business	Supervisor's Name	Telephone . .
Job Title	Reason for Leaving	
Responsibilities		

4. Company Name	Location (Address)	Dates of Employment: From To
Type of Business	Supervisor's Name	Telephone . .
Job Title	Reason for Leaving	
Responsibilities		

May we contact the employers listed above? ☐ YES ☐ No	Date Available
If no, indicate which one(s) you do not wish us to contact and state the reason why not.	

REFERENCES (List persons known at least five years -- not friends or relatives)

NAME	LOCATION (Address)	TELEPHONE	RELATIONSHIP
		. .	
		. .	
		. .	

AGREEMENT (Please Read Carefully)

I certify that all of the information given by me on this application or in supplemental form is true, correct, and complete to the best of my knowledge. I further understand that false or misleading statements or consequential omissions of any kind on this application or supplemental forms are sufficient cause for my not being hired or my dismissal if I am hired.

I authorize and release the Company or its agents to contact, obtain, and verify information in this application from previous employers, educational institutions, and references. I authorize and release those organizations and individuals to provide and release information sought by the Company or its agents.

I understand that the Company is an equal employment opportunity employer, including that it is the policy of the Company not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of the individual's need for reasonable accommodation pursuant to the Americans with Disabilities Act, as amended. I understand and agree that I should report any violation of the Company's policies on equal employment opportunity and its policies prohibiting discrimination, harassment, and retaliation. If hired, I understand and agree I will comply with those policies and all applicable federal, state, or local law.

I agree that if employed, employment with the Company is for no definite duration and may be terminated at will by either the Company or me. The Employee Handbook or other policies or procedures of the Company are not a contract and cannot create a contract of employment for any definite duration. I agree and understand that only the Chief Operation Officer of the Company has the authority to establish a contract of employment with me, and that any such contract must be in writing, designated as an employment contract, and signed by both parties.

This certifies that this application was completed by me, and that all entries on it and information in it are true, correct, and complete, to the best of my knowledge.

Signature of Applicant	Date