WEATHER SHIELD. Employment Application

Date:								
Name:					 =- -irst		 Middle	
Address:								
						Email:		
	R NAME(S) YOU							
AT WHICH LOC	ATION(S) ARE Y	OU AVAILABL	E TO WORK:					
Ladysmith, WI Med			d, WI	Park I	-alls, WI	Other: _		
WHICH POSITION	ON ARE YOU API	PLYING FOR:						
TYPE OF POSITI	ION APPLYING F	-OR:						
☐ Full Time	☐ Part T	ime 🗆	Other			_ 🗆 1st Shift	☐ 2nd Shift	☐ 3rd Shift
HAVE YOU BEE	N EMPLOYED W	ITH ANY WEA	ATHER SHIELD	LOCATION	BEFORE?			
No	Yes	Div	vision:			Dates: _		
Department(s)				Sup	ervisor(s) Name:_		
DATE AVAILABI	LE TO BEGIN WO	ORK:				ANNUAL SA	LARY REQUIREMEN	Г:
HOW WERE YO	U REFERRED TO	WEATHER SI	HIELD? (Please	check all tha	it apply.)			
☐ Newspape	er 🗆 Job	Center	☐ Friend/R	Relative	□ Interne	et (Please List Site	e):	
☐ Employee	of the Schiel	d Family Br	ands (Please	Name) _				
ARE YOU OF LE	EGAL AGE TO W	ORK? (Age 18	in production a	area)	No	Yes		
ARE YOU PRESE	ENTLY AUTHORI	ZED TO WOR	K IN THE U.S. C	ON A FULL-T	TIME BASIS?			
No	Yes (Emp	loyment is	subject to ve	erification	of authoriza	ation to work in th	ne U.S.)	
ARE YOU UNDE OR OTHERWISE	ER ANY OBLIGAT E RESTRICTING Y	TION TO A PR	EVIOUS EMPLO	OYER THROUPLOYMENT	JGH A NON-0 WITH A COM	COMPETE, SECRECY PETITIVE FIRM?	, AND/OR INVENTIC	N AGREEMENT,

No Yes

Employment History (Please list in chronological order)

PLEASE BE AWARE THAT ANY FALSE STATEMENTS, OMISSIONS OR MISLEADING STATEMENTS PERTAINING TO WORK HISTORY SHALL BE SUFFICIENT CAUSE FOR DENIAL OF EMPLOYMENT OR TERMINATION.

MOST RECENT EMPLOYER Company Name: _____ Address ______ Phone ______ ☐ Full Time ☐ Part Time Shift: _____ Average Hours/Week:_____ Dates Employed: From _____ To____ Last Day Worked _____ Type of Work/Job Title: Last Salary: _____ Name of Supervisor/Extension:_____ Reason for Leaving (Please be detailed): NEXT EMPLOYER Company Name: _____ Address______ Phone ______ ☐ Full Time ☐ Part Time Shift: ______ Average Hours/Week: _____ Dates Employed: From _____ To____ Last Day Worked _____ Type of Work/Job Title: ______ Last Salary: _____ Name of Supervisor/Extension:_____ Reason for Leaving (Please be detailed): **NEXT EMPLOYER** Company Name: _____ Address______ Phone ______ ☐ Full Time ☐ Part Time Shift: ______ Average Hours/Week: _____ Dates Employed: From _____ To_____ Last Day Worked _____ Type of Work/Job Title: ______ Last Salary: _____ Name of Supervisor/Extension:_____ Reason for Leaving (Please be detailed):

WEATHER SHIELD. Employment Application **WINDOWS & DOORS**

Education/Other

PLEASE LIST ANY SKILLS A	TTAINED THROUGH	WORK OR ED	UCATION YOU FEEL ARI	E RELEVANT TO THE	POSITION:
4.04.0.51.410.751.410.110.10					
ACADEMIC TRAINING					
High School – Gradua	te: LI No	☐ Yes	☐ Equivalency		
College/Technical Scl	nool – Graduate:	□No	☐ Yes		
List College/Technica	Degree(s) Acquir	red (include	school degree was a	attained from):	
List Colleges/Technic	al Schools Attend	ed (may not	have graduated):		
MILITARY SERVICE/DATES	:				
CI:II A : I					
Skills Acquired:					
LIST CAREER CERTIFICATI	ONS:				
OTHER SKILLS/INFORMAT	ION:				
LIST COMPUTER PROGRA	MS YOU HAVE EXPER	IENCE USING	(check all that apply	·)	
☐ MS Windows [☐ MS Word ☐] AutoCAD	☐ Oracle Enter	prise One/JD Ed	dwards
☐ MS Excel ☐ M	S PowerPoint	☐ AS400	☐ SolidWorks	☐ Timetrak	☐ Direct Route
☐ Additional program	ns vou have exper	ience usina	(Not Listed Ahove).		

No Yes

Note: Convictions or pending charges will not automatically disqualify an applicant from consideration for employment.

References

Please list professional references to contact (not relatives) who are acquainted with your work history

REFERENCE:	
Name:	
Company City and State:	
Phone:	Email:
REFERENCE:	
Name:	
Occupation/Relationship:	
Company City and State:	
Phone:	Email:
REFERENCE:	
Name:	
Occupation/Relationship:	
Company City and State:	
Phone:	Email:
Company policy prohibits direct supervision of a	relative or significant relationship.
AGREEME	NT TO INVESTIGATE AND RELEASE:
statements or omissions concerning requested in	blication is true, correct, and complete. I understand that any false information on this application shall be sufficient cause for denial of tand that my employment at Weather Shield (The Company) is work record and references.
without malice in connection with evaluating my party having information bearing upon my qualif (unless otherwise stated). I also release from any	ves of The Company, for their acts performed in good faith and application, credentials, and qualifications. I further authorize any ications for employment to release such information to The Company and all liability all individuals and organizations who provide vithout malice concerning my employment competence, ethics, erwise privileged or confidential information.
specific length of time, but, rather is of an "at wil may terminate my employment at any time with a handbook, policy manual, work rules or publicati understood that this "at will" employment relation	I am employed by The Company my employment is not for any I" nature, which means that I may resign at any time and my employer or without cause. I understand that no present or future employee on constitutes an employment agreement or contract. It is further onship may not be changed by any written document or by conduct igned by both myself and an authorized executive of The Company as
The Company Drug Testing Policy requires appli contingent upon successfully passing a test.	cants to submit to drug/alcohol screening, and employment is
\square I have read and understand the above agree	ment.
eSignature (enter your full legal name here)	

