



PUKALL LUMBER COMPANY APPLICATION FOR EMPLOYMENT

Pukall Lumber Company is an Equal Employment Opportunity Employer

PERSONAL INFORMATION

Date: _____

Name _____
Last First Middle

Address _____
Street City State Zip

Telephone _____ Cell _____

Email _____

Are you 18 years of age or older ? Yes No

Are you a U. S. citizen or an alien authorized to work in the U.S.? Yes No

EMPLOYMENT DESIRED

Type of Work Desired? _____ Salary Desired? _____

Date You Can Start? _____ How Were You Referred To Our Organization? _____

Are You Employed Now? Yes No If So, May We Contact Your Current Employer? Yes No

Education

Type	Name/Location	Course of Study	# Years	Degree/Diploma
Elementary & Jr. High	_____	_____	_____	_____
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Technical or Other	_____	_____	_____	_____

General

Please list any additional information that relates to your ability to perform the job for which you have applied, such as training, certifications, licenses (exclude organizations, the name of which indicates the race, creed, age, marital status, of its' members).

EMPLOYMENT RECORD

<u>Company Name and Address</u>	<u>Kind of Work</u>	<u>Date Started/Left</u>	<u>Rate of Pay</u>	<u>Reason for Leaving</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Which of These Jobs Did You Like Best? _____

What Did You Like Most About the Job? _____

REFERENCES: Give the names of 3 persons, not related to you, whom you have known at least one year.

<u>Name</u>	<u>Occupation</u>	<u>Address & Telephone</u>	<u>Years Known</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

In Case of Emergency, Contact:

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
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U. S. Military Service

Branch of Service _____ From _____ To _____

Rank _____ Training/Experience Received _____

Present Membership in National Guard or Reserves ? Yes No

Applicant's Statement

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law, this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the chief operating officer of this organization. I understand that this application is not a contract of employment.

If employed, I agree to abide by all of the work and safety rules of the Company. I understand that this Company has a drug and alcohol policy that provides for pre-employment testing. Also, if employed, I realize that the Company conducts post-accident, reasonable suspicion, periodic and/or random drug and/or alcohol testing of its employees, and that consent to and compliance with such policy is a condition of my employment. I have read, understand and agree to the above statement (Please initial here) _____

I hereby certify that the answers given by me to the above questions and statements are true and correct and hereby authorize you to contact references, schools, law enforcement agencies and firms named therein, except my current employer if so noted, to provide information requested about me, and release them from all liability for damage in providing this information. It is understood and agreed that any misrepresentation, false statement, or omissions by me in this Application will be sufficient reason for rejection of my application or for dismissal at any time during my employment, without liability to the Company.

Your Signature _____ Date _____

Please submit the completed Application to Human Resources at kellyf@pukall-lumber.com or mail to Pukall Lumber Company, Human Resources, 10894 Highway 70 East, Arbor Vitae, WI 54568