

THE MOULDING COMPANY

ARCHITECTURAL MOULDINGS

www.TheMouldingCompany.com

APPLICATION FOR EMPLOYMENT

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE - APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

DATE _____

Name _____

Last
First
Middle
Maiden

Present address _____

Number / Street
City
State
Zip

Telephone _____ Social Security No. _____ - _____ - _____

If under 18, please list age _____ Date of Birth _____
 Days/hours available to work: No Pref: _____

Position applied for (1) _____ Mon _____ Tue _____
 and salary desired (2) _____ (Be specific) Wed _____ Thur _____
 Fri _____ Sat _____

Date Available to Start? _____ How many hours can you work weekly? _____

Employment desired: FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	YRS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Post Grad				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

Concord Store • 5117 Commercial Circle, Concord, CA 94520 • PH: 925-798-7525 / FAX: 925-566-3324
Santa Clara Store • 1987 Russell Avenue, Santa Clara, CA 95054 • PH: 408-748-6968 / FAX: 408-748-6967
Millbrae Store • 355 Adrian Road, Millbrae, CA 94030 • PH: 650-648-0300 / FAX: 650-648-0301

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Military Experience

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Work Experience

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer:	Name of last supervisor	Employment dates	Pay or salary
Full Address:		From	Start
		To	Final
Phone number:	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer:	Name of last supervisor	Employment dates	Pay or salary
Full Address:		From	Start
		To	Final
Phone number	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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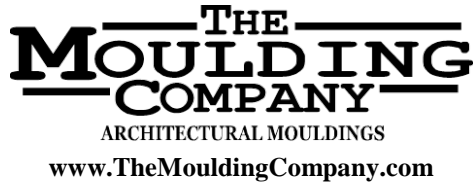
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May we contact your present employer? Yes No

Did you complete this application yourself Yes No

If not, who did? _____



PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by The Moulding Company (hereinafter called "TMC"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of TMC, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of TMC. Both the undersigned and TMC may end the employment relationship at any time, without specified notice or reason. If employed, I understand that TMC may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give TMC permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release TMC from any liability as a result of such contract.

I also understand that (1) TMC has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, TMC may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, TMC, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with TMC shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with TMC is terminable at will for any reason by either party.

Signature of applicant _____ Date: _____

The Moulding Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.
