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**DIRT CHEAP PRICES!**



**A.W. GRAHAM LUMBER LLC.**  
137 MADDOX PIKE  
FLEMINGSBURG, KY 41041  
**606-845-9663 OR 1-877-845-9663**  
WWW.GRAHAMLUMBER.COM

**Position Applied For:** \_\_\_\_\_

**Date of Application:** \_\_\_\_\_

# **Employment Application**

No question on this application is intended to secure information to be used for a discriminatory purpose, as A.W. Graham LLC is an equal employment opportunity employer and does not discriminate on the basis of race, color, religion, sex, citizenship, national origin, age, veteran, Reserve, National Guard, marital status, disability, or any other legally protected status.

**APPLICANT'S STATEMENT OF UNDERSTANDING AND AUTHORIZATION:**

I understand and authorize A.W. Graham Lumber LLC. to contact any of the former employers or references shown below to verify the information I have given and I authorize previous employers to release all records of my employment, including assessments of my job performance, ability and fitness.

I understand and authorize A.W. Graham Lumber LLC. to conduct a screening process for criminal history.

I understand and authorize A.W. Graham Lumber LLC. to screen my records with the Motor Vehicle Record Department.

I understand that A.W. Graham Lumber LLC. reserves the right to require a conditional offer of employment, a pre-employment as well as post-employment drug/alcohol test, to the extent permitted by law.

I hereby state that the information given by me in this application is true in all respects, and I agree that if I am employed and the information is found to be false in any respect that I may be dismissed.

I hereby accept A.W. Graham Lumber LLC. requirement for participation in the ADR – Alternative Dispute Resolution Program, if the Company does participate.

**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# Application for Employment

PLEASE PRINT

**WELCOME!**

Position Applying for: \_\_\_\_\_ Date: \_\_\_\_\_

Name:

Social Sec No.

Street:

City:

State:

Zip Code:

Home Telephone:

Cell Phone:

**How were you referred to us?**

Other

Current Employee

Newspaper Ad

Agency

School

Walk-in

**Name of referral source:**

**Please Note:** Answer the questions to the best of your ability. All information will be treated confidentially. **In completing this application all candidates agree to resolve all disputes regarding this application for employment through A.W. Graham Lumber LLC Dispute Resolution Program.**

**The issuance of this application in no way constitutes an employment agreement.** A.W. Graham Lumber LLC is an at-will employer and may hire, or terminate with or without notice for cause or without cause.

**Failure to complete this application in its entirety may lead to rejection of the application by A.W. Graham Lumber LLC.** If the information supplied by the applicant is found to be false or misleading, A.W. Graham Lumber LLC reserves the right to terminate the application process or the employee should you be hired.

Thank You.

## EMPLOYMENT HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for any gaps and any period of unemployment. If self-employed, give firm name and supply business references.

Name of Present or Last Employer		Length of Employment		Position or Title
Company:		From:	To:	
Address:		<b>Salary or Hourly Rate</b>	Duties/Responsibilities:	
City, State, Zip Code:				
Telephone:		Reason for Leaving:		
Name of Present or Last Employer		Length of Employment		Position or Title
Company:		From:	To:	
Address:		<b>Salary or Hourly Rate</b>	Duties/Responsibilities:	
City, State, Zip Code:				
Telephone:		Reason for Leaving:		
Name of Present or Last Employer		Length of Employment		Position or Title
Company:		From:	To:	
Address:		<b>Salary or Hourly Rate</b>	Duties/Responsibilities:	
City, State, Zip Code:				
Telephone:		Reason for Leaving:		
Name of Present or Last Employer		Length of Employment		Position or Title
Company:		From:	To:	
Address:		<b>Salary or Hourly Rate</b>	Duties/Responsibilities:	
City, State, Zip Code:				
Telephone:		Reason for Leaving:		

## TYPE OF WORK DESIRED

**Do you wish to work:**

Full-time

Part-Time

Temporarily

If part-time specify hours or days: \_\_\_\_\_ Minimum salary requirement? \_\_\_\_\_

Date available for work: \_\_\_\_\_

**SKILLS OR EXPERIENCE IN:**

Please list any skills used in your prior employment: \_\_\_\_\_

**Do you have the required experience?**  Yes  No

**If so, in what departments have you worked?**

**Sales**  Yes  No **Service**  Yes  No **Office**  Yes  No

List any additional skills or experience you have to offer:

**Typing/wpm:** \_\_\_\_\_ **Filing:** \_\_\_\_\_ **Computer Skills/ MS Word?**  Yes  No

**MS Excel?**  Yes  No **Power Point?**  Yes  No

**MS Publisher?**  Yes  No **MS Outlook?**  Yes  No

**Other:** \_\_\_\_\_

## EDUCATION

	Print Name and Address for each School Listing	No. of Years Completed	Degree, Major or Type of Course
College			
Graduate School			
Trade, Business, Night School			
Other			

## MILITARY EXPERIENCE

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Dates of Duty: From \_\_\_\_\_ To \_\_\_\_\_ Rank at separation \_\_\_\_\_

Were you in the U.S. Armed Forces?  Yes  No If so, what branch?

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## GENERAL INFORMATION

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Are you legally authorized to work in the United States?  Yes  No

Are you below the age of eighteen?  Yes  No

Do you know of any reason why you cannot perform the essential functions of the job for which you are applying with or without reasonable accommodations?  Yes  No

Please describe any accommodations required:

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Do you have a valid driver's license?  Yes  No Number: \_\_\_\_\_ State: \_\_\_\_\_

Any restrictions on license?  Yes  No If yes, explain: \_\_\_\_\_

Do you hold a commercial driver's license?  Yes  No

If a driver's license is required for the position for which you are applying, have you ever been convicted of a DWI (Driving While Intoxicated or Driving Under the Influence)?  Yes  No

If yes, give date and details of each conviction: \_\_\_\_\_

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Have you ever been convicted of a criminal offense?  Yes  No

Date \_\_\_\_\_ Place \_\_\_\_\_ Nature of offense: \_\_\_\_\_

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***(An affirmative answer will not automatically disqualify you from being considered as a candidate for employment)***

**NOTE: Do you have any criminal charges pending or arrest record? If yes, please explain:**

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Have you previously been employed by A.W. Graham Lumber LLC. ?  Yes  No

If yes, Which dealership/company? \_\_\_\_\_ When? \_\_\_\_\_

Name of Manager during previous employment: \_\_\_\_\_

Position held during previous employment: \_\_\_\_\_

Reason for departure: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES (Not Employers or Relatives, List at least three)**

Name	Address	Occupation	Phone

Please include any other information you think would be helpful to us in considering you for employment such as additional work experience, articles, books published, activities, accomplishments, etc.

(You may exclude all information indicative of age, sex, race, religion, color, national origin or disability).

**Thank you for taking the time to complete this application in detail.**



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