The Mentor Lumber and Supply Company EMPLOYMENT APPLICATION

Email completed application to: hr@mentorlumber.com, or mail to: HR Dept. 7180 Center St. Mentor, OH 44060

tion, marital status, disability, genetic information, age, membership in an employee organization, parental status, military service, or other non-merit factor.
Lumber does not discriminate in hiring or employment based on the basis of race, color, religion, sex (including pregnancy and gender identity), national origin, political affiliation, sexual orien
The Mentor Lumber and Supply Company pledges itself to the policies of Equal Employment Opportunity and Affirmative Action for all employees and applicants seeking employment. Mentor

NAME			DATE		
ADDRESS			HOME PHONE		
CITY	STATE	ZIP CODE	OTHER PHONE		
LOCATION: Mentor Chardon	EMAIL	ADDRESS			
POSITION(S) APPLIED FOR			_ FULL-TIME PART-TIME SEASONAL		
REFERRED BY Advertisement Relative Friend Walk-in Other					
DATE AVAILABLE FOR WORK		SALARY RI	EQUIREMENTS		
HAVE YOU BEEN EMPLOYED BY MENTOR LUMBER AND SUPPLY BEFORE? Yes 🗖 No 🗖 IF YES, GIVE					

EXPERIENCE List present or most recent position first. In addition, list all previous positions, including any military service. (Attach additional sheet if needed)					
Dates of <u>Employment</u>	COMPANY NAME	YOUR TITLE		SALARY	IMMEDIATE SUPERVISOR
FROM:	COMPANY ADDRESS		TELEPHONE	LIST MAJOR DUTIES	
TO:	REASON FOR LEAVING				
Dates of Employment	COMPANY NAME	YOUR TITLE		SALARY	IMMEDIATE SUPERVISOR
FROM:	COMPANY ADDRESS		TELEPHONE	LIST MAJOR DUTIES	
TO:	REASON FOR LEAVING				
Dates of Employment	COMPANY NAME	YOUR TITLE		SALARY	IMMEDIATE SUPERVISOR
FROM:	COMPANY ADDRESS		TELEPHONE	LIST MAJOR DUTIES	
TO:	REASON FOR LEAVING			1	

EDUCATION				
	Name and Location	Attendance (last year completed)	List diploma/degree received	Major subject
HIGH SCHOOL		1 2 3 4		
TECHNICAL, BUSINESS OR PROFESSIONAL TRAINING		1 2 3 4		
COLLEGE OR UNIVERSITY		1234		
GRADUATE SCHOOL		1 2 3 4		

DO YOU HAVE	COMPUTER	SKILLS?
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LIST SOFTWARE USED

LIST ANY OTHER SPECIAL JOB-RELATED SKILLS, APPRENTICESHIP, SPECIALIZED TRAINING OR ANY ADDITIONAL INFORMATION YOU WOULD LIKE US TO KNOW

PROFESSIONAL REFERENCES Refer to people with whom you have worked for/with and are familiar with your work performance and experience.					
NAME	OCCUPATION / COMPANY TELEPHONE				
1.					
2.					
3.					

ARE YOU CURRENTLY EMPLOYED? YES NO MAY WE REQUEST REFERENCES FROM YOUR CURRENT EMPLOYER? YES NO Applicant Initials
I understand and expressly agree that The Mentor Lumber and Supply Company may make or employ an agency to make an investigation of my competence, character, general reputation and personal characteristics as it deems necessary. I expressly consent to such investigation and release all parties from all liability for any damage that may result from furnishing same to you.
DRIVING RECORD (to be completed by those applying for positions which include driving responsibilities)
HAVE YOU HAD A VIOLATION FOR WHICH YOU WERE CITED?
IF YES, PLEASE LIST
DO YOU POSSESS A CURRENT/VALID CDL? I YES INO WHICH CLASS? A B
*Mentor Lumber and Supply Companies are required by our liability insurance company to conduct a MVR (Motor Vehicle Registration) Report for each individual who is hired with driving re- sponsibilities to ascertain insurability. In addition, a pre-employment query will be conducted via the FMCSA Commercial Driver's License Drug and Alcohol Clearinghouse for all CDL drivers.
CONVICTION RECORD
HAVE YOU BEEN CONVICTED OF A FELONY? YES NO
IF YES, PLEASE EXPLAIN :

*Convictions will not necessarily disqualify an applicant for employment

I certify that all information on this form is true to the best of my knowledge and belief. I understand that I will be subject to dismissal at any time if I have made any misrepresentations herein or during the interview process. I give my consent to and understand that the satisfactory completion of a medical examination is a condition of employment with The Mentor Lumber and Supply Companies. I also agree to submit to a blood or urine test for the purpose of detecting the presence of alcohol or drugs, and understand that these results will be used to determine my eligibility for initial employment.

I hereby authorized Mentor Lumber to make any investigation of my personal history, academic/professional credentials, military service records, criminal, and driving records through any investigative bureaus of the company's choice

I understand that employment with The Mentor Lumber and Supply Companies is an employment at will; where, if employed by The Mentor Lumber and Supply Companies, I may sever my employment with the company for any or no reason, and the company may terminate my services on the same basis.

APPLICANT'S SIGNATURE

DATE

2020