



APPLICATION FOR EMPLOYMENT

IN ORDER FOR YOU TO BE CONSIDERED FOR EMPLOYMENT BY CARHART LUMBER COMPANY, THIS APPLICATION MUST BE FILLED OUT IN ITS ENTIRETY. PLEASE PRINT CLEARLY. WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB-RELATED MEDICAL CONDITION OR HANDICAP, OR ANY OTHER LEGALLY PROTECTED STATUS. CARHART LUMBER COMPANY IS AN AT-WILL EMPLOYER, AND EMPLOYMENT MAY BE TERMINATED AT ANY TIME BY EITHER THE EMPLOYEE OR EMPLOYER.

APPLICANT INFORMATION

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Driver's License #: _____ Social Security #: _____ Date of Birth: _____

Position Applied For: _____

Location: ☐ Wayne ☐ Pierce ☐ Hartington ☐ Bloomfield ☐ Neligh ☐ O'Neill ☐ Tilden ☐ North Platte ☐ Norfolk

What type of position are you looking for? ☐ Full-Time ☐ Part-Time ☐ Temporary

How did you learn about this job? ☐ Radio ☐ Newspaper ☐ Employment Agency ☐ Employee ☐ Internet ☐ Other

Please explain: _____

BACKGROUND INFORMATION

Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?	_____	
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Are you currently employed?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, where?	_____	
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May we contact your current employer?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How soon would you be available to work?	_____	
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Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain:	_____	
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Do you have a clean driving record?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, explain:	_____	
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EDUCATION

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

PREVIOUS EMPLOYMENT

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

MILITARY SERVICE

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

SPECIAL SKILLS

Describe any specialized training, apprenticeship, and/or skills you have learned:
(Example: Forklift training, CDL license, etc.)

Indicate any foreign languages you can speak, read, and/or write:

Please list any special honors or awards you have received:

REFERENCES

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

DISCLAIMER & SIGNATURE

I understand that if I have omitted any material fact or have given any false information on this application, I will be disqualified from employment or, if hired, I will be discharged upon discovery of such omission or false statement. Also, by signing this application, I am giving Carhart Lumber Company permission to investigate relevant facts about me, contact previous employers, and conduct a medical examination, drug screen, or criminal record check on which the employment is conditioned. A conditional job offer must be made by Carhart Lumber Company before any medical exam is given. Failure of such screenings will void any and all employment offers made by Carhart Lumber Company.

Signature: _____ Date: _____

Thank you for your interest in employment with Carhart Lumber Company. Please return this application for review.

105 Main St
Wayne, NE 68787
402.375.2110

123 East Main St
Pierce, NE 68767
402.329.4932

119 E Main St
Hartington, NE 68739
402.254.3928

200 N Broadway
Bloomfield, NE 68718
402.373.4314

207 W 4th St
Neligh, NE 68756
402.887.4106

116 N 4th St
O'Neill, NE 68763
402.336.1670

103 Center St
Tilden, NE
402.368.2202

221 West Front Street
North Platte, NE 69101
308.532.4000

2100 Riverside Blvd
Norfolk, NE 68701
402.644.7839

General Office
PO Box 430 · Wayne, NE 68787
402.375.2112

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