



APPLICATION FOR EMPLOYMENT

Smith Phillips Building Supply

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 1100 W. Front Street, Statesville, NC 28677 • 704.872.9866

SECTION 1: PERSONAL INFORMATION

TODAY'S DATE: _____

LAST NAME: _____ FIRST NAME: _____ MIDDLE INITIAL: _____

STREET ADDRESS: _____

CITY/STATE/ZIP CODE: _____

CELL PHONE: _____ HOME PHONE: _____

ARE YOU AT LEAST 18 YEARS OF AGE? YES NO

ARE YOU APPLYING FOR: FULL TIME PART TIME/SEASONAL

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES? YES NO

FOR WHAT POSITION ARE YOU APPLYING?

ARE YOU CURRENTLY EMPLOYED? YES NO

HOW DID YOU HEAR OF THIS OPENING?

IF YES, MAY WE CONTACT YOUR CURRENT EMPLOYER? YES NO

ON WHAT DATE ARE YOU AVAILABLE TO BEGIN WORK?

DO YOU HAVE A VALID DRIVER'S LICENSE? YES NO
IF CDL, PLEASE COMPLETE SECTION 5

WHAT IS YOUR DESIRED WAGE/SALARY?

SECTION 2: QUALIFICATIONS

PLEASE INDICATE AREAS IN WHICH YOU HAVE EXPERIENCE:

| | | |
|---------------------|----------------------------------------|----------------------------|
| _____ LUMBERYARD | _____ CNC | _____ SECRETARIAL/CLERICAL |
| _____ WAREHOUSE | _____ BUILDING MATERIALS/INSIDE SALES | _____ ACCOUNTING |
| _____ FORKLIFT | _____ BUILDING MATERIALS/OUTSIDE SALES | _____ CREDIT/COLLECTIONS |
| _____ TRUCK DRIVING | _____ BUILDING MATERIALS/MANAGEMENT | _____ PURCHASING |
| _____ MILLWORK | | |

DO YOU HAVE OTHER SKILLS OR EXPERIENCE THAT MAY BE HELPFUL IN CONSIDERING YOUR APPLICATION?

SECTION 3: EDUCATION

| TYPE OF SCHOOL | NAME OF SCHOOL | # OF YEARS COMPLETED | MAJOR/DEGREE | DID YOU GRADUATE? |
|-----------------------------------------------------------|----------------|----------------------|--------------|-------------------|
| HIGH SCHOOL OR EQUIVALENT <input type="checkbox"/> GED | | | | |
| TRADE SCHOOL | | | | |
| COLLEGE | | | | |
| GRADUATE SCHOOL | | | | |
| OTHER | | | | |

SECTION 4: EMPLOYMENT HISTORY

PLEASE COMPLETE THIS SECTION BEGINNING WITH CURRENT OR MOST RECENT EMPLOYMENT. FOR CDL DRIVERS, THE DEPARTMENT OF TRANSPORTATION REQUIRES EMPLOYMENT INFORMATION FOR THE PAST TEN YEARS INCLUDING ANY MILITARY EXPERIENCE.

ARE YOU A VETERAN? YES IF YES, WHAT BRANCH:
 NO

| | |
|------------------------------|------------------------|
| DATES EMPLOYED: _____ | POSITION: _____ |
| COMPANY: _____ | SALARY/WAGES: _____ |
| ADDRESS: _____ | |
| PHONE: _____ | SUPERVISOR: _____ |
| REASON FOR LEAVING: _____ | |

| | |
|------------------------------|------------------------|
| DATES EMPLOYED: _____ | POSITION: _____ |
| COMPANY: _____ | SALARY/WAGES: _____ |
| ADDRESS: _____ | |
| PHONE: _____ | SUPERVISOR: _____ |
| REASON FOR LEAVING: _____ | |

| | |
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| DATES EMPLOYED: _____ | POSITION: _____ |
| COMPANY: _____ | SALARY/WAGES: _____ |
| ADDRESS: _____ | |
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| REASON FOR LEAVING: _____ | |

SECTION 4: EMPLOYMENT HISTORY CONT.

| | |
|------------------------------|------------------------|
| DATES EMPLOYED: _____ | POSITION: _____ |
| COMPANY: _____ | SALARY/WAGES: _____ |
| ADDRESS: _____ | |
| PHONE: _____ | SUPERVISOR: _____ |
| REASON FOR LEAVING: _____ | |

| | |
|------------------------------|------------------------|
| DATES EMPLOYED: _____ | POSITION: _____ |
| COMPANY: _____ | SALARY/WAGES: _____ |
| ADDRESS: _____ | |
| PHONE: _____ | SUPERVISOR: _____ |
| REASON FOR LEAVING: _____ | |

PLEASE ATTACH ADDITIONAL SHEETS IF NECESSARY.

SECTION 5: CDL DRIVER INFORMATION

PLEASE COMPLETE THIS SECTION IF YOU HOLD A VALID CLASS A OR CLASS B CDL LICENSE.

DRIVER'S LICENSE #: _____ STATE OF ISSUE: _____ CLASS: _____

ENDORSEMENT(S): _____

PLEASE INDICATE EQUIPMENT ON WHICH YOU HAVE EXPERIENCE:

| | |
|----------------------|-------------------------|
| _____ STRAIGHT TRUCK | _____ TRACTOR & TRAILER |
| _____ BOX TRUCK | _____ BOOM |

IN WHAT STATES HAVE YOU OPERATED DURING THE PAST FIVE YEARS? _____

HAVE YOU HAD ANY ACCIDENTS, TRAFFIC VIOLATIONS OR LICENSE FORFEITURE IN THE PAST FIVE YEARS? YES NO

SECTION 6: ADDITIONAL INFORMATION

PLEASE FEEL FREE TO ADD ANY ADDITIONAL INFORMATION THAT YOU FEEL WILL HELP US EVALUATE YOUR APPLICATION.

SECTION 7: NOTICES

SMITH PHILLIPS STRIVES TO MAINTAIN A DRUG-FREE WORKPLACE FOR THE SAFETY OF OUR EMPLOYEES AND CUSTOMERS. **A DRUG SCREEN IS REQUIRED PRIOR TO EMPLOYMENT.**

SMITH PHILLIPS WILL REQUIRE A **CRIMINAL BACKGROUND REPORT PRIOR TO EMPLOYMENT. CRIMINAL CONVICTIONS WILL NOT NECESSARILY BAR YOU FROM CONSIDERATION, DEPENDING UPON THE NATURE AND SERIOUSNESS OF ANY OFFENSE AND THE LENGTH OF TIME SINCE THE CONVICTION.**

SMITH PHILLIPS WILL REQUIRE AN **MVR REPORT PRIOR TO EMPLOYMENT AS A CDL DRIVER OR FOR ANY OTHER POSITION WHICH MAY REQUIRE DRIVING A COMPANY VEHICLE.** ALL FURTHER INFORMATION REQUIRED BY THE US DEPARTMENT OF TRANSPORTATION WILL BE COMPLETED UPON OFFER OF EMPLOYMENT.

SMITH PHILLIPS IS AN **EQUAL OPPORTUNITY EMPLOYER.** QUALIFIED APPLICANTS ARE CONSIDERED FOR EMPLOYMENT WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, MARITAL STATUS, VETERAN STATUS, SEXUAL ORIENTATION OR ANY OTHER LEGALLY-PROTECTED STATUS. WE ARE COMMITTED TO BUILDING A TEAM THAT REPRESENTS A VARIETY OF BACKGROUNDS, PERSPECTIVES, AND SKILLS.

SECTION 8: APPLICANT'S STATEMENT AND SIGNATURE

I CERTIFY THAT MY ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. IF I AM ACCEPTED FOR EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION IN MY APPLICATION OR INTERVIEW MAY RESULT IN MY EMPLOYMENT BEING TERMINATED.

I HEREBY AUTHORIZE SMITH PHILLIPS BUILDING SUPPLY AND/OR ITS AGENTS TO CONTACT ANY PREVIOUS EMPLOYER OR SCHOOL TO VERIFY THE INFORMATION I HAVE GIVEN ON MY EMPLOYMENT APPLICATION AND/OR DURING ANY EMPLOYMENT INTERVIEW REGARDING MY EDUCATION, QUALIFICATIONS, WORK EXPERIENCE AND REASONS FOR TERMINATION OF PAST EMPLOYMENT.

I ALSO AUTHORIZE ANY PREVIOUS EMPLOYER OR SCHOOL TO PROVIDE SMITH PHILLIPS BUILDING SUPPLY AND/OR ITS AGENTS WITH SUCH INFORMATION IN CONNECTION WITH THIS APPLICATION FOR EMPLOYMENT. FURTHER, I HEREBY RELEASE FROM LIABILITY AND HOLD HARMLESS ALL PERSONS AND CORPORATIONS SUPPLYING THIS INFORMATION TO SMITH PHILLIPS BUILDING SUPPLY AND/OR ITS AGENTS.

I UNDERSTAND THAT SMITH PHILLIPS IS AN "AT WILL" EMPLOYER AND THAT EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE, BY EITHER THE COMPANY OR THE EMPLOYEE.

Applicant's Signature

Date

Name (*printed*)