

Swanson Bros. Lumber Co.

Application for Employment

Last name			First		Middle Initial		Are you at least 18 years old?		Date of application	
Street address							Specific job desired		Social Security number	
City			State		ZIP		Home telephone		Work telephone	
How were you referred to our Company? (Circle one.)	A By your school	B Advertisement	C Employment agency	D By an employee	If so, give name:	E Recruiting Source	F Walk-in	G Other		

Please read carefully and complete by printing in ink or typing.

An Equal Opportunity Employer

We are an equal opportunity employer. We do not discriminate on the basis of race, color, religion, national origin, sex, age, marital status, or existence of any physical or mental disability that does not interfere with the performance of the position for which you are applying. Information provided on this application will not be used for any discriminatory purpose.

Provide all information requested.

This employment application will be kept in an active application file for forty-five (45) days unless it is screened out. Your application will be considered only for the job(s) for which you have applied. To keep your application active, you must return to this office after thirty (30) days but prior to forty-five (45) days and request your application be renewed. At that time you will be requested to date and sign a renewal form and make any appropriate updates to your application. This application renewal process must be repeated every forty-five days to keep your application under consideration for employment with our Company.

Employment Record

Starting with present or most recent, list all previous employers. Include self-employment, summer, and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Last or present company		Type of business		Type or classification of job	
Street address			Phone number		Brief description of job duties
City	State	ZIP code			
Supervisor's name			Phone number		
	Dates worked	From	To		
Reason for leaving					
Last or present company		Type of business		Type or classification of job	
Street address			Phone number		Brief description of job duties
City	State	ZIP code			
Supervisor's name			Phone number		
	Dates worked	From	To		
Reason for leaving					

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City	State	ZIP code	
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	Dates worked From	To	
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City	State	ZIP code	
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	Dates worked From	To	
Reason for leaving			
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	Dates worked From	To	
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Supervisor's name		Phone number	
	Dates worked From	To	
Reason for leaving			

Educational History

School name	Location (city, state)	Major course or subject	Graduated		Degree
			Yes	No	
High school					
Technical/trade (after high school)					
College (list all attended)					
Other education/training					

Outside Activities

(Exclude those indicating race, color, religion, sex, national origin, age, or disability.)

Professional memberships, certificates, or licenses held

Past and present civic or cultural activities — include offices held

Principal hobbies

Special Skills

To be completed by applicant for office/clerical work

To be completed by applicant for shop/plant work

Typing	Yes No	Words per minute:	Type of machines operated	Years experience
Dictation	Yes No	Words per minute:		
Computer skills	Hardware Software			
Please list other skills and/or equipment/language experience you have acquired	List other shop/production skills			
	Served apprenticeship	Yes No	Type:	

