



APPLICATION FOR EMPLOYMENT

THE GREAT LAKES COMPANIES, INC. AND SUBSIDIARIES

2608 GREAT LAKES WAY HINCKLEY, OH 44233
 PHONE: (330) 220-3900 FAX: (330) 220-7670

AN EQUAL OPPORTUNITY EMPLOYER

All applicants are considered for positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or qualified disability.

Name _____ Date _____

Last First Middle

Address _____

Street City State Zip

Home Phone _____ Social Security # _____ Are you over 18? _____

Position Applied For _____ How did you learn of this position? _____

Have you applied or worked for Great Lakes in the past? _____ If yes, give dates _____

When would you be available for work? _____ Are you legally entitled to work in the United States? _____

Are you available to work: Full Time (30 hrs. or more) Part Time (30 hrs. or less) Temporary Overtime Weekends

Have you ever been discharged by a prior employer? If yes, please explain: _____

Have you ever been convicted of a felony? If yes, please explain: _____

A conviction record will not necessarily be a bar to employment, and factors such as age and time of offense, seriousness and nature of violations, and rehabilitation will be taken into account.

Summarize previous work experience, skills, certifications, union affiliation, etc. that are relevant to this position or the construction industry:

EDUCATION

Name of School	City/State	Course of Study	Years Completed	Degree	GPA
High School					
College					
Graduate					

WORK EXPERIENCE

List positions in chronological order starting with current or most recent

Employer	Date Hired	Positions Held and Description of Duties	Reason for Leaving
Street Address	Date Separated		Name of Immediate Supv.
City/State/Zip	Starting Salary		Title
Phone	Ending Salary		May we contact?

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REFERENCES

Name/Title	Address	Phone	Length of Time Known
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IMPORTANT – PLEASE READ BEFORE SIGNING

My signature constitutes my certification that my responses are true and complete and that I have read and understand this paragraph. Where an item is left blank, it is because there is no information within its scope. My signature further constitutes my authorization for The Great Lakes Companies, Inc. and subsidiaries to investigate the facts submitted and for those with relevant information, including, but without limitation, physicians, hospitals, schools, law enforcement agencies and my prior employers, to provide such information to The Great Lakes Companies, Inc. and subsidiaries, and I release them from any liability for doing so. A copy of this form shall serve as my authorization to release information and records. I hereby consent to undergo such drug screenings and post-offer medical examinations as The Great Lakes Companies, Inc. and subsidiaries may require (which may include obtaining body tissue or fluid samples and analysis of them). I understand and agree that any falsification or omission either on this form or in my responses to questions asked during the interviewing or examination process or on employment forms I may subsequently complete, including "I-9" forms, shall be grounds for immediate termination of employment, no matter when the falsification or omission is discovered. **I ALSO UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT IS TO BE 'AT WILL' AND THAT EITHER I OR MY EMPLOYER MAY TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE, UNLESS THE 'AT WILL' ARRANGEMENT IS MODIFIED BY A WRITTEN AGREEMENT SIGNED BY BOTH ME AND THE PRESIDENT OF THE GREAT LAKES COMPANIES, INC. AND/OR ONE OF ITS SUBSIDIARIES OR A COLLECTIVE BARGAINING AGREEMENT TO WHICH I AM BOUND.**

Signature

Date

NOTICE TO EMPLOYEES AND APPLICANTS

All employees and applicants are entitled under the law to equal employment opportunity. If you believe you have been discriminated against in employment on the basis of race, color, religion, national origin, sex, or age, you are entitled to notify the Equal Employment Opportunity Commission, 1801 L Street NW, Washington, DC 20507.

DO NOT WRITE BELOW THIS LINE

Interviewed By

Date