



2751 UNIVERSAL ST. OSHKOSH, WI 54904

**PRE-EMPLOYMENT
QUESTIONNAIRE
AN EQUAL OPPORTUNITY
EMPLOYER**

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

NAME (LAST NAME FIRST)			SOCIAL SECURITY NO.	
PRESENT ADDRESS	APT. NO.	CITY	STATE	ZIP
PERMANENT ADDRESS	APT. NO.	CITY	STATE	ZIP
PREVIOUS ADDRESS IF LESS THAN 3 YEARS	APT. NO.	CITY	STATE	ZIP
PHONE #	CELL PHONE #	ARE YOU 18 YEARS OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO		ARE YOU LEGALLY AUTHORIZED TO WORK IN THE US? <input type="checkbox"/> YES <input type="checkbox"/> NO
EMAIL	EMERGENCY CONTACT		NAME	PHONE

LAST

DESIRED EMPLOYMENT

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?	WHEN?
EVER WORKED FOR THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?	WHEN?
REASON FOR LEAVING		
NAME OF LAST SUPERVISOR AT THIS COMPANY		
WHO REFERRED YOU TO THIS COMPANY? <input type="checkbox"/> EMPLOYMENT AGENCY <input type="checkbox"/> NEWSPAPER ADVERTISING <input type="checkbox"/> FRIEND <input type="checkbox"/> ONLINE AD <input type="checkbox"/> STATE EMPLOYMENT OFFICE <input type="checkbox"/> COLLEGE PLACEMENT SERVICE <input type="checkbox"/> WALK IN <input type="checkbox"/> OTHER		

FIRST

MIDDLE

EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK
SPECIAL TRAINING, CERTIFICATIONS, LICENSES
SPECIAL SKILLS, FOREIGN LANGUAGES, ETC.

FORMER EMPLOYERS

LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST.

NAME OF PRESENT OR LAST EMPLOYER			
ADDRESS		CITY	STATE ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR		TITLE	PHONE
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME OF PREVIOUS EMPLOYER			
ADDRESS		CITY	STATE ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR		TITLE	PHONE
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME OF PRESENT OR LAST EMPLOYER			
ADDRESS		CITY	STATE ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR		TITLE	PHONE
DESCRIPTION OF WORK			
REASON FOR LEAVING			

REFERENCES

LIST PROFESSIONAL REFERENCES WHOM WE MAY CONTACT.

	NAME	ADDRESS	BUSINESS	PHONE NUMBER
1				
2				
3				
4				

SERVICE RECORD

HAVE YOU EVER SERVED IN THE U.S. ARMED FORCES? <input type="checkbox"/> YES <input type="checkbox"/> NO	BRANCH OF SERVICE
DISCHARGE DATE	RANK

HAVE YOU EVER BEEN CONVICTED OF, PLEAD GUILTY/NO CONTEST TO, OR HAD A SUSPENDED IMPOSITION OF SENTENCE FOR ANY OFFENSE (OTHER THAN A MINOR TRAFFIC VIOLATION)? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, EXPLAIN.

(A CONVICTINAL RECORD WILL NOT NECESSARILY EXCLUDE YOU FROM CONSIDERATION. THIS INFORMATION WILL BE USED ONLY FOR JOB-RELATED PURPOSES AND ONLY TO THE EXTENT PERMITTED BY LAW.)

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Millwork Distributors, Inc. (hereinafter called "the Company" or "MDI"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of MDI, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President/General Manager of the Company. Both the undersigned and MDI may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

Signature of applicant _____

Date: _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

INDUSTRIAL EVALUATION

NUMERICAL ACCURACY

IF THE CORRESPONDING NUMBERS DO NOT MATCH, PLACE AN "X" IN THE SPACE BETWEEN THE TWO NUMBERS

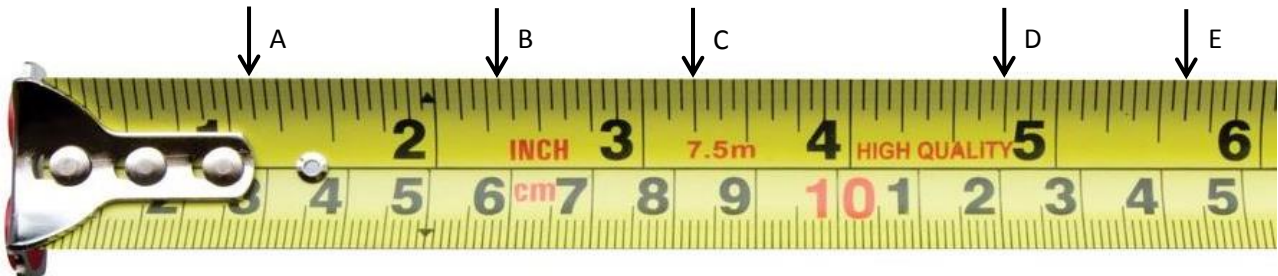
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">628 _____ 628</td> <td style="width: 50%; padding: 2px;">0.09035 _____ 0.09035</td> </tr> <tr> <td style="padding: 2px;">7694713 _____ 7693713</td> <td style="padding: 2px;">1,251,392 _____ 1,251.39</td> </tr> <tr> <td style="padding: 2px;">43092561 _____ 43902561</td> <td style="padding: 2px;">002536123 _____ 002536213</td> </tr> <tr> <td style="padding: 2px;">\$5,643.13 _____ \$5,643.13</td> <td style="padding: 2px;">2349765 _____ 2349764</td> </tr> </table>	628 _____ 628	0.09035 _____ 0.09035	7694713 _____ 7693713	1,251,392 _____ 1,251.39	43092561 _____ 43902561	002536123 _____ 002536213	\$5,643.13 _____ \$5,643.13	2349765 _____ 2349764	
628 _____ 628	0.09035 _____ 0.09035								
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GENERAL MATH

<table style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">12</td><td style="padding: 2px;">292</td></tr> <tr><td style="padding: 2px;">43</td><td style="padding: 2px;">479</td></tr> <tr><td style="padding: 2px;">65</td><td style="padding: 2px;">19</td></tr> <tr><td style="padding: 2px;">+ 77</td><td style="padding: 2px;">390</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">101</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">+ 767</td></tr> </table>	12	292	43	479	65	19	+ 77	390		101		+ 767	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">61</td><td style="padding: 2px;">64.5</td><td style="padding: 2px;">87,321</td></tr> <tr><td style="padding: 2px;">- 43</td><td style="padding: 2px;">- 38.6</td><td style="padding: 2px;">- 51,934</td></tr> </table>	61	64.5	87,321	- 43	- 38.6	- 51,934	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">431</td><td style="padding: 2px;">728.03</td><td style="padding: 2px;">67</td></tr> <tr><td style="padding: 2px;">x 43</td><td style="padding: 2px;">x 9</td><td style="padding: 2px;">x 3</td></tr> </table>	431	728.03	67	x 43	x 9	x 3	<p>4 5/8 + 3 1/4 =</p> <p>5 11/16 - 4 5/8 =</p> <p>35 ÷ 7 + 5 =</p>
12	292																										
43	479																										
65	19																										
+ 77	390																										
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MEASUREMENTS

IN THE SPACE PROVIDED, WRITE THE MEASUREMENTS INDICATED BY THE ARROWS ON THE RULERS BELOW.



A _____ B _____ C _____ D _____ E _____

**DO NOT WRITE ON THIS PAGE
FOR INTERVIEWER'S USE ONLY**

INTERVIEWED BY	DATE
COMMENTS	

INTERVIEWED BY	DATE
COMMENTS	

INTERVIEWED BY	DATE
COMMENTS	

HIRED (DATE) FOR DEPT.	FOR POSITION
SALARY WAGES	WILL REPORT
APPROVED 1	EMPLOYMENT MANAGER DATE
APPROVED 2	DEPARTMENT MANAGER DATE
APPROVED 3	GENERAL MANAGER DATE

Interviewer: The additional information that may be necessary to complete an applicant's record can be obtained after hiring, during a POST HIRING INTERVIEW. Adams Form No. 9287 Employee's Record File contains a section for this purpose, while also serving as a means for up-to-date recording of employment status changes and for holding all employment forms.