

PLEASE READ

The A.C. Houston Lumber Company requires all applicants to take a drug and alcohol test.

You will be eligible for hire after you have passed this test.



AC HOUSTON
LUMBER COMPANY
 "Lumbermen Since 1884"

APPLICATION FOR EMPLOYMENT

Date of Application _____

Position Applied For _____ Name _____ Last _____ First _____ Middle _____

Social Security No. _____ Address _____ Street _____ City _____ State & Zip _____

How Many Years at Present Address _____ Phone _____

Addresses for the past three years

Address _____ Street _____ City _____ State & Zip _____ How Long? _____

Address _____ Street _____ City _____ State & Zip _____ How Long? _____

Address _____ Street _____ City _____ State & Zip _____ How Long? _____

Do you have the legal right to work in the United States? _____ Can you provide proof of age? _____

Have you worked for this company before? _____ Where? _____

Dates: From _____ To _____ Rate of Pay _____ Position _____

General Information

Are you capable of performing the essential functions of the position you are applying for? Yes No

Do you have relatives currently working for The A. C. Houston Lumber Company? Yes No If yes: _____

Name: _____ Department: _____ Relationship: _____

(Note: A. C. Houston Lumber prohibits the employment of relatives under specific circumstances.)

Have you ever been convicted of a crime other than juvenile offenses or traffic tickets? Yes No

If yes, please provide the following: Nature of Conviction: _____ Date of Conviction: _____

(Note: Conviction of a crime is not necessarily a bar to employment. Each case is considered individually on the basis of the nature of the job applied for.)

High School, Colleges, Business or Vocational Schools Attended	Name of School	Location	Major	Dates Attended	Type of Degree
Professional Licenses, Registrations, and/or Certifications	Type	State	Number	Issue Date	Expiration Date

Work History

Are you employed at present? Yes No Yes No No

May we contact your present Employer? Yes No

Employer Name		From	To	Job Title
Address				Duties
City	State	Zip		
Contact Person		Phone Number	Salary	Reason For Leaving
Employer Name		From	To	Job Title
Address				Duties
City	State	Zip		
Contact Person		Phone Number	Salary	Reason For Leaving
Employer Name		From	To	Job Title
Address				Duties
City	State	Zip		
Contact Person		Phone Number	Salary	Reason For Leaving

- I certify that all information furnished on this application is complete and accurate to the best of my knowledge. I understand that falsification of any information on this application is sufficient grounds for denial of employment or immediate discharge if discovered after employment.
- If hired I agree to a drug examination and other examinations for pre-employment, as well as during the course of employment. Employment may be contingent on the outcome of the examination.
- If employed, I agree to abide by the rules and regulations of The A. C. Houston Lumber Company.

Date: _____

Signature: _____

Affirmative Action Survey

Please note: This data is for periodic government reporting and will be kept in a confidential file separate from the application for employment.

Please Complete Applicant Data Record

Applicants are considered for all positions and employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap.

As employers, we comply with government regulations and affirmative action responsibilities.

Solely to help us comply with government record keeping, reporting and other legal requirements, please fill out the Affirmative Action Survey.

Name _____ Phone () _____ Date _____
Last First Middle
Address _____
Number Street City State Zip Code

Government agencies require periodic reports on the sex, ethnicity, handicapped and veteran status of applications. This data is for analysis and affirmative action only. Submission of information is voluntary.

Check One:

- Male Female

Check one of the following:

- Race/Ethnic Group: White (Not Hispanic or Latino) Black or African American Hispanic or Latino
 American Indian or Alaska Native Asian Two or More Races Native Hawaiian or Other Pacific Islander

Check if any of the following are applicable:

- Vietnam Era Veteran Disabled Veteran Handicapped Individual
-