



EMPLOYMENT APPLICATION

Foster Remodeling Solutions, Inc. values its employees and recognizes the need for a safe, productive and healthy work environment. Employees abusing drugs and/or alcohol are less productive and are often a risk to the safety and welfare of the company and its clients.

It is the policy of Foster Remodeling Solutions, Inc. to maintain a workplace free from the use and abuse of drugs and alcohol. We require that all employees participate in our Drug-Free Workplace Program and Background Check as a condition of employment.

EMPLOYEE INFORMATION

Personal Information

Date: _____

Full Name: _____
Last Name *First Name* *M.I.*

Address: _____
Street Address *Apt #*

_____ *City* _____ *State* _____ *Zip Code*

Home Phone: _____ Cell Phone: _____

EMPLOYMENT DESIRED

Position

Position Desired: _____

Salary Requirement: _____ Available Start Date: _____
Salary or Hourly Request

Are you currently Employed? Yes No

May we contact your current employer? Yes No

Have you ever been convicted of a crime? Yes No

EDUCATION

Education

High School: _____
Name of School *Years Attended* *Graduation Year*

_____ *Courses or Program Taken*



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EDUCATION		
Education		
Tech School:	_____	_____
	<i>Name of School</i>	<i>Years Attended</i>

	<i>Courses or Program Taken</i>	
College:	_____	_____
	<i>Name of School</i>	<i>Years Attended</i>

	<i>Courses or Program Taken</i>	
List any other special skills or abilities that would be helpful for this position	_____	

PREVIOUS EMPLOYMENT		
Previous Employment		
Company Name:	_____	
	<i>Company Name</i>	
Contact Name:	_____	
	<i>Contact</i>	
Address:	_____	
	<i>Street Address</i>	<i>Suite #</i>

	<i>City</i>	<i>State</i>
	<i>Zip Code</i>	
Business Phone:	_____	Other Phone: _____
Email:	_____	
Position:	_____	
Dates of Employment:	_____	_____
	<i>From</i>	<i>To</i>

	<i>Salary/Hourly Rate</i>	
Reason for Leaving:	_____	



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PREVIOUS EMPLOYMENT

Previous Employment

Company Name: _____
Company Name

Contact Name: _____
Contact

Address: _____
Street Address _____ *Suite #* _____

_____ *City* _____ *State* _____ *Zip Code* _____

Business Phone: _____ Other Phone: _____

Email: _____

Position: _____

Dates of Employment: *From* _____ *To* _____ *Salary/Hourly Rate* _____

Reason for Leaving: _____

REFERENCES

Reference #1

Give names of three persons not related to you, who can comment on your work experience and whom you have known for at least one year.

Name: _____
Last Name _____ *First Name* _____ *M.I.* _____

Address: _____
Street Address _____ *Apt #* _____

_____ *City* _____ *State* _____ *Zip Code* _____

Home Phone: _____ Cell Phone: _____

Relationship: How do you know this person? _____ How long have you known this person: _____



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REFERENCES		
Reference #2		
<i>Give names of three persons not related to you, who can comment on your work experience and whom you have known for at least one year.</i>		
Name:	_____	
	<i>Last Name</i>	<i>First Name</i> <i>M.I.</i>
Address:	_____	
	<i>Street Address</i>	<i>Apt #</i>
	_____	_____
	<i>City</i>	<i>State</i> <i>Zip Code</i>
Home Phone:	_____	Cell Phone: _____
Relationship: How do you know this person?	_____	How long have you known this person: _____

REFERENCES		
Reference #3		
<i>Give names of three persons not related to you, who can comment on your work experience and whom you have known for at least one year.</i>		
Name:	_____	
	<i>Last Name</i>	<i>First Name</i> <i>M.I.</i>
Address:	_____	
	<i>Street Address</i>	<i>Apt #</i>
	_____	_____
	<i>City</i>	<i>State</i> <i>Zip Code</i>
Home Phone:	_____	Cell Phone: _____
Relationship: How do you know this person?	_____	How long have you known this person: _____

"I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment. Any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you."

Signature

Date



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(Do not write below this line)

Interviewed by:

Date:

Hired:

Position:

Salary:

Start Date: