Application For Employment

Grand Rapids Carvers

4465 Roger B. Chaffee SE, Grand Rapids, MI 49548 616-538-0022

Grand Rapids Carvers is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Applicant Name	e First:		M.I.	Last:			
Full Address							
Telephone							
Email Address							
Application Dat	e						
Date available	То						
Start working	if						
hired							
Employment I	olying for:	nosition?					
now did you i	ear about this	position:					
"any" for any	available hours) Any slots left b	lank will be ass	umed you are ι	s (ex. 8:30am-5 unable to work o		hose days.
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		Sunday
	to work Over T				to and from wo		
*Desired Salar Personal Infor Are you a U.S.	citizen or appr				YI	ES	NO
Will you consent to a mandatory controlled substance test? Do you have any pre-existing injuries? If YES, please explain below.						_	NO
	ny pre-existing	injuries? if YES,	piease explain	below.	Y	ES	NO
•		d of a criminal c			r)? YI nd disposition of		NO e case:
offense, including a	ny significant details		ption of the event, an		late of the offense, the cumstances and the re		
Job Skills/ Qua							
Please list belo	ow the skills an	d qualifications	you possess for	the position fo	r which you are	app	olying:

(Grand Rapids Carvers complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

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Education and Training

High School										
Name	Location (City, State)	Did You Graduate	Degree Earned							
		<u>Y/N</u>								
- H										
College/University										
Name	Location (City, State)	Did You Graduate	Degree Earned							
		Y/N								
Vocational school/ Special Training										
Name	Location (City, State)	Did You Graduate	Degree Earned							
INdille	Location (City, State)	Y/N	Degree Larried							
Military:		1/14								
Are you a member of the	e Armed Services?									
What was your military i	•									
What was your mineary i	ank when disendiged:									
Pervious Employment										
Employer Name:		Dates Employed								
Job Title:										
Telephone Number:										
Reason For Leaving: _	•									
	·									
Employer Name:	Dates Employed									
Job Title:										
Telephone Number:										
Reason For Leaving: _										
Employer Name:	Dates Employed									
Job Title:										
	elephone Number:									
Reason For Leaving: _										
References:										
	al and professional referenc	e(s) below:								
Reference Name	<u> </u>	Contact Information								
AT-WILL EMPLOYMENT										
The relationship between you and Grand Rapids Carvers is referred to as "employment at will." This										
means that your employment can be terminated at any time for any reason, with or without cause, with										
or without notice, by you or Grand Rapids Carvers. No representative of Grand Rapids Carvers has										
authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You										
understand that your employment is "at will," and that you acknowledge that no oral or written										
statements or representations regarding your employment can alter your at-will employment status,										
except for a written statement signed by you or one of our Company Owners.										
*Your signature of this application indicates that all/any statements and/or information is accurate and										
true to the best of your	_	Data								
Applicant Signature Date:										