EMPLOYMENT APPLICATION





OVERHEAD DOOR COMPANY OF NORFOLK REVIEWS APPLICANTS FOR EMPLOYMENT WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, AGE, DISABILITY, OR VETERAN STATUS IN ACCORDANCE WITH FEDERAL, STATE AND LOCAL LAWS. OVERHEAD DOOR COMPANY OF NORFOLK WILL PROVIDE REASONABLE ACCOMMODATION TO INDIVIDUALS WITH DISABILITIES.

DATE:	

THIS EMPLOYMENT APPLICATION COULD BE THE FIRST WORK PRODUCT YOU ARE PRODUCING FOR US. PLEASE TAKE THE TIME TO COMPLETE THIS APPLICATION THOROLIGHLY. IT IS PREFERRED THAT THE APPLICATION BE HAND WRITTEN

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PERSONAL INFORMATION NAME (FIRST, MIDDLE INITIAL, LAST)				
NAME (FIRST, MIDDLE INITIAL, LAST)				
ADDRESS (NUMBER & STREET, CITY, STATE, ZIP CODE)	TELEPHONE NUMBER			
IF AT YOUR CURRENT ADDRESS FOR LESS THAN ONE YEAR, LIST YOUR	OTHER NAMES UNDER WHICH RECORDS EXIST ABOUT YOU			
PREVIOUS ADDRESS				
ARE YOU LEGALLY PERMITTED TO WORK IN THE U.S.:				
THE TOO ELONEET FERWITTED TO WORK IN THE G.G	☐ YES ☐ NO			
HAVE YOU EVER BEEN CONVICTED OF A FELONY YES NO	HAVE YOU EVER BEEN EMPLOYED BY OVERHEAD DOOR CO. OF			
IF YES, LIST ALL CONVICTIONS, SHOWING OFFENSE & DATE	NORFOLK, A SUBSIDIARY OR RELATED ORGANIZATION?			
	YES NO			
	IF YES, DATES & LOCATION			
	HAVE YOU EVER APPLIED FOR A POSITION WITH THIS COMPANY BEFORE? YES NO			
THE FACT THAT YOU MAY HAVE A RECORD OF CONVICTION DOES NOT				
NECESSARILY DISQUALIFY YOU FOR EMPLOYMENT FOR WHAT TYPE OF POSITION ARE YOU APPLYING?	IF YES, DATES & LOCATION TYPE OF EMPLOYMENT YOU ARE SEEKING			
	FULL TIME PART TIME TEMPORARY OTHER			
WHAT DATE ARE YOU AVAILABLE TO START WORK?	SHIFT(S) YOU ARE AVAILABLE TO WORK			
	☐ FIRST ☐ SECOND ☐ THIRD ☐ OTHER			
MILLAT A DE VOLID COMPENCATION DECLUDEMENTO	_ S _ SSSSSS _ SSSSSS _ SSSSSSS			
WHAT ARE YOUR COMPENSATION REQUIREMENTS?	WILL YOU WORK OVERTIME AS REQUIRED?			
	☐ YES ☐ NO			
ARE YOU ABLE TO TRAVEL?	DO YOU HAVE A VALID DRIVERS LICENSE WITH AN AVAILABLE			
	DRIVING RECORD?			
WHO SUGGESTED YOU APPLY FOR A POSITION WITH OVERHEAD DOOR				
☐ ADVERTISEMENT ☐ EMPLOYMENT AGENCY ☐ GOVERNMENT LIST ANY FRIENDS, ACQUAINTANCES, OR RELATIVES WHO ARE EMPLOY				
EIOT AINT TRIENDS, AGGOAINTANGES, OR RELATIVES WITO ARE EINI EO	ED DI OVERNILAD DOOR GOINII ANT OF NORT CER			
EDUCATION & TRAINING				
	DEGREE DATES			
SCHOOL	EARNED GPA ATTENDED MAJOR COURSE OF STUDY			
HIGH SCHOOL (NAME & ADDRESS)				
COLLEGE OR VOCATIONAL SCHOOL (NAME & ADDRESS)				
OCELEGE ON VOOMMONAL CONTOOL (IVINE WASDINECOS)				
GRADUATE SCHOOL (NAME & ADDRESS)				
DO YOU PLAN TO CONTINUE YOUR EDUCATION?	PROFESSIONAL SOCIETY MEMBERSHIPS			
IF YES, IN WHAT FIELD?				
OTHER SKILLS/TRAINING RELEVANT TO YOUR CANDIDACY (COMPUTER	SKILLS, CERTIFICATIONS, MILITARY TRAINING, TYPING SPEED, ETC)			

EMPLOYMENT EXPE	RIENCE					
		UR WORK HISTORY. PLEASE LIST ADD	ITIONAL EMPLOYMENT DATA	ON A SEPARATE SHEET OF PA	APER.	
NAME & ADDRESS OF CURRENT OR LAST EMPLOYER			STARTING TITLE	CURRENT OR LAST TITE	.E	
EMPLOYED FROM	EMPLOYED T	ГО	AVERAGE NUMBER OF	AVERAGE NUMBER OF HOURS YOU WORK PER WEEK (INCLUDE OT)		
PAY RATE (PLEASE SPLIT BASE & INCENTIVE PAY IF APPROPRIATE)			DATE & AMOUNT OF LAST WAGE INCREASE			
BRIEF DESCRIPTION OF F	RESPONSIBIL	ITIES (NOT NECESSARY TO COMP	PLETE IF YOU HAVE ATTA	CHED A RESUME)		
REASON FOR LEAVING			IMMEDIATE SUPERVISOR'S NAME & TELEPHONE NUMBER			
CAN WE CONTACT THIS E	EMPLOYER W	ITHOUT JEOPARDIZING YOUR CU	IRRENT EMPLOYMENT SI	TUATION? YES 1	NO	
NAME & ADDRESS OF CURRENT OR LAST EMPLOYER			STARTING TITLE CURRENT OR LAST TITLE			
EMPLOYED FROM	EMPLOYED T	ГО	AVERAGE NUMBER OF	HOURS YOU WORK PER WEEK (INCLUDE OT)		
PAY RATE (PLEASE SPLIT BASE & INCENTIVE PAY IF APPROPRIATE)			DATE & AMOUNT OF LAST WAGE INCREASE			
BRIEF DESCRIPTION OF F	RESPONSIBIL	ITIES (NOT NECESSARY TO COMP	PLETE IF YOU HAVE ATTA	CHED A RESUME)		
REASON FOR LEAVING			IMMEDIATE SUPERVISOR'S NAME & TELEPHONE NUMBER			
NAME & ADDRESS OF CU	IRRENT OR L	AST EMPLOYER	STARTING TITLE	CURRENT OR LAST TITL	F	
TO THE GREEK OF THE	THE STATE	OT EINI EOTEIX	01711(111(0)11122			
EMPLOYED FROM	EMPLOYED T	ГО	AVERAGE NUMBER OF	VERAGE NUMBER OF HOURS YOU WORK PER WEEK (INCLUDE OT)		
PAY RATE (PLEASE SPLIT BASE & INCENTIVE PAY IF APPROPRIATE)			DATE & AMOUNT OF LAST WAGE INCREASE			
BRIEF DESCRIPTION OF F	RESPONSIBIL	ITIES (NOT NECESSARY TO COMP	PLETE IF YOU HAVE ATTA	CHED A RESUME)		
REASON FOR LEAVING			IMMEDIATE SUPERVISOR'S NAME & TELEPHONE NUMBER			
HAVE YOU EVER, WITH A IF YES, WHY?	NY EMPLOYE	R, BEEN DISCHARGED FOR CAUS	SE OR DISCIPLINED IN TH	E WORKPLACE? YES	□ NO	
REFERENCES						
PLEASE PROVIDE THE IN CAPABILITIES. PLEASE D		REQUEST BELOW FOR INDIVIDUA JDE ANY RELATIVES.	LS WHO CAN COMMENT	ON YOUR QUALIFICATIONS	S AND YOUR	
NAME		ADDRESS/TELEPHONE NUMBER	BUSINESS	OCCUPATION	YRS ACQUANTED	
PRE-EMPLOYMENT		THE APPLICATION IS TRUE AND COM				

- 1. THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. ANY MISREPRESENTATION OR OMISSION OF FACT IN MY APPLICATION, RESUME, AND OTHER MATERIALS, OR DURING MY INTERVIEWS, CAN BE JUSTIFICATION FOR REFUSAL OF EMPLOYMENT, OR TERMINATION OF EMPLOYMENT
- 2. ANY OFFER OF EMPLOYMENT FROM OVERHEAD DOOR COMPANY OF NORFOLK IS CONTINGENT UPON MY SUCCESSFUL COMPLETION OF OVERHEAD DOOR COMPANY OF NORFOLK'S SCREENING PROCESS, INCLUDING THE COMPANY RECEIVING REFERENCES THAT IT CONSIDERS SATISFACTORY, AND MY SATISFACTORY COMPLETION OF A POST-JOB OFFER PRE-EMPLOYMENT PHYSICAL EXAMINATION, INCLUDING A DRUG OR ALCOHOL SCREENING. I ALSO UNDERSTAND AND AGREE THAT, IF EMPLOYED, I MAY BE REQUIRED TO SUBMIT TO FURTHER ALCOHOL OR DRUG SCREENING.
- 3. IN PROCESSING MY APPLICATION FOR EMPLOYMENT, THE COMPANY MAY VERIFY ALL THE INFORMATION PROVIDED BY ME, OR MAY PROCURE OR HAVE PREPARED A CONSUMER OR AN INVESTIGATIVE CONSUMER REPORT FOR THIS PURPOSE CONCERNING, AMONG OTHER THINGS, MY PRIOR EMPLOYMENT OR MILITARY RECORD, EDUCATION, CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, CRIMINAL RECORD AND MODE OF LIVING. I UNDERSTAND THAT, UPON WRITTEN REQUEST TO THE COMPANY, I WILL BE INFORMED OF WHETHER AN INVESTIGATIVE CONSUMER REPORT WAS REQUESTED AND GIVEN FULL INFORMATION AS TO THE NATURE AND SCOPE OF THIS INVESTIGATION.
- 4. I AUTHORIZE AND REQUEST THAT MY PRESENT EMPLOYER, UNLESS OTHERWISE NOTED, FORMER EMPLOYERS AND THOSE INDIVIDUALS I HAVE LISTED AS REFERENCES, FURNISH INFORMATION ABOUT MY EMPLOYMENT RECORD, INCLUDING THE REASON FOR MY TERMINATION, WORK PERFORMANCE, ABILITIES, AND OTHER QUALITIES PERTINENT TO MY EMPLOYMENT QUALIFICATIONS, AND HEREBY RELEASE THEM FROM ANY AND ALL LIABILITY FOR DAMAGES ARISING FROM FURNISHING THE REQUESTED INFORMATION.
- 5. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO COMPLY WITH THE POLICIES, RULES, REGULATIONS AND PROCEDURES OF OVERHEAD DOOR COMPANY OF NORFOLK AND UNDERSTAND THAT MY EMPLOYMENT AND COMPENSATION CAN BE MODIFIED OR TERMINATED WITH OR WITHOUT CAUSE OR NOTICE, AT ANY TIME, AT THE OPTION OF EITHER THE COMPANY OR ME.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MXIMUM OF NINETY (90) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST RE-APPLY.

If a reasonable accommodation is needed for the interview process, please contact Regina Armeli (757) 363-0330 or rarmeli@ohdnorfolk.com.

SIGNATURE	DATE