JOB APPLICATION

Foothills Custom Cabinet 6262 W 55th Ave, Arvada, Colorado 80002 303-422-4020

Foothills Custom Cabinet 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.

Please fill out all of the sections below:

Applicant Information		
Applicant Name:		
Address:		
City, State and Zip Code:	_	
Telephone Number:		
Email Address:		
Date of Application:		
Employment Position Position(s) applying for: Installers, Cabinet Makers (full time)		
How did you hear about this position?		
What days are you available for work?		
What hours or shift are you available for work?		
If needed, are you available to work overtime?		
On what date can you start working if you are hired?		
Do you have reliable transportation to and from work?		
Salary desired:		
Personal Information		
Are you a U.S. citizen or approved to work in the United States?	Yes	No
What document can you provide as proof of citizenship or legal status?		
Will you consent to a mandatory controlled substance test?	Yes	No
Do you have any condition which would require job accommodations?	Yes	No
If yes, please describe accommodations required below.		

Job Skills/Qualifications Please list below the skills and	qualifications you possess for t	the position for which yo	u are applying:
(Note: Footbills Custom Cabin	et complies with the ADA and c	conciders reasonable acc	ammodation measures that
	applicants/employees to perfor		ommouation measures that
Education and Training			
High School		T v a l	
Name	Location (City, State)	Year Graduated	Degree Earned
College/University	1	T	1 .
<u>Name</u>	Location (City, State)	Year Graduated	Degree Earned
Vocational School/Specialized	 Training	<u> </u>	<u> </u>
Name	Location (City, State)	Year Graduated	Degree Earned
-			
Military:			
Are you a member of the Arn			
What branch of the military of	did you enlist?		
What was your military rank	when discharged?		
How many years did you serv	e in the military?		
What military skills do you po	ossess that would be an asset fo	or this position?	
<u>Previous Employment</u>			
Employer Name: Job Title:			
Supervisor Name:			
Employer Address:			
City, State and Zip Code:			
Employer Telephone:			
Dates Employed:			
Reason for leaving:			

Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Additional Information: Do you have any other special skills or applying for?	previous work experience that would qualify you for the position
means that your employment can be without notice, by you or the Foothill authority to enter into any agreeme understand that your employment is "a representations regarding your emplo	eFoothills Custom Cabinet is referred to as "employment at will." This terminated at any time for any reason, with or without cause, with or is Custom Cabinet. No representative of Foothills Custom Cabinet has nt contrary to the foregoing "employment at will" relationship. You at will," and that you acknowledge that no oral or written statements or yment can alter your at-will employment status, except for a written our Executive Vice-President/Chief Operations Officer or the Company's
Applicant Signature:	Dated: