Application for Employment

Please Print

Design Homes, Inc. P.O. Box 239 Prairie Du Chien, WI 53821 608-326-6041

Equal access to programs, services and employment is avaithe application and/or interview process should notify a re-				able accom	modati	on to
Position(s) applied for			Date of applic	cation	1	
Name		Арр	licant ID#			
Last First		Middle :				
Address Street Cellular/Other # () Cellular/Other # (City	E-mail Address	State		ZIP C	Code
Referral Source (How did you hear about us?)						
If you are under 18 and it is required, can you furnish a w	ork permit?				☐ Yes	□No
If no , please explain:						
Have you ever been employed here before? If yes, give dat	es and positions:				☐ Yes	
Is this application a request for reemployment following a If yes, additional information may be requested.	n extended military lea	ve of absence fro	m this compa	ny?	☐ Yes	
Are you legally eligible for employment in this country?					☐ Yes	
Date available for work / / / Wh	at is your desired salar	y range?		\$_		
Type of employment desired: ☐ Full-Time ☐ Pa	rt-Time 🗆 Temp	oorary 🗆 S	Seasonal	☐ Educa	ational	Co-Op
Are you able to perform the "essential functions" of the jo	b for which you are app	olying (with or wi	thout reasona	able accom	modati	on)?
This question is not designed to elicit information about an applic particular accommodation, or whether accommodation is necessary						ity,
☐ Yes ☐ No ☐ Need more information about the	job's "essential function	ns" to respond				
Driver's license number required if driving may be required	in the job for which you	ı are applying:			State	e
Answering "yes" to either part of the following question does not seriousness and nature of the violation, rehabilitation and position			actors such as da	ate of the of	fense,	
Have you ever pleaded "guilty" or "no contest" to, or been	convicted of, a crime?.		•••••		☐ Yes	
If yes , please provide date(s) and details:						
Employment History						
Starting with your most recent employer, provide the follo						
Employer Telephone :)	Dates employed:	onth Year	to	/ Yea	Tt.
Street address City	State	Hourly	Compensation (S		per	
Starting job title/final job title		Commission/Bonus/Othe	r Compensation \$			
Immediate supervisor and title (for most recent position held)	May we contact for reference? Yes No Later	Hourly	Compensation ((Final)	201	
Why did you leave?	E-mail:	Commission/Bonus/Othe			per	
Summarize the type of work performed and job responsibilities.						
Employer Telephone #		Dates employed:	onth / Year	to	/ Yea	ır
Street address City	State		Compensation (S	tarting)	U.C.	
Starting job title/final job title		Commission/Bonus/Other			per	
Immediate supervisor and title (for most recent position held)	May we contact for reference?		Compensation ((Final)		
Why did you leave?	E-mail:	Commission/Bonus/Other	Salary \$ Compensation \$		per	
Summarize the type of work performed and job responsibilities.	<u> </u>			-		
Employer Telephone #	THE STREET	Dates employed:	onth / Year	to	/ Year	ıf
Street address City	State		Compensation (S	tarting)		
Starting job title/final job title		Commission/Bonus/Other	Salary \$		per	
Immediate supervisor and title (for most recent position held)	May we contact for reference? Yes No Later		Compensation ((Final)	STANSTON OF	
Why did you leave?	E-mail:	Commission/Bonus/Other	Salary \$ Compensation \$		per	
Summarize the type of work performed and job responsibilities.		Commission, bonds, other	Compensation 4			

Skills and Qualification: Summarize any special training,		certificates that	may assist you	ı in performing the	e position for which	you are applying:
Computer Skills (Check appropriate	te boxes. Include software	titles and yea rs of	f experience.)			
☐ Word Processing	Y	ears:	□ E-mail _			Years: ———
☐ Spreadsheet	Y	ears:	□ Internet			Years:
☐ Presentation	Y	ears:	□ Other			Years:
Educational Background						
Starting with your most recent s	chool attended, provid	le the following	g information.			
School (include City	& State)		Years Completed	Complete	d GPA Class Rank	Major/Minor
				□ Diploma □ GED	Class Kink	
				☐ Degree ☐ Certification ☐		
Total Control of the Control				Other		
				□ Diploma □ GED □ Degree □		
				☐ Certification ☐ Other ☐		
				□ Diploma □ GED		
				☐ Degree ☐ Certification ☐		
				Other	A	
References			S. Jean op			
List names and telephone num	bers of three business	work reference	es who are not	t related to you an	d are not previous s	supervisors.
If not applicable, list three scho	ol or personal referen		The second		William Will have been been been been been been been be	# of Voors
Name	Title	Relationship to You		Telephone	E-mail	# of Years Known
			()	465143		
Applicant Statement						
I certify that all information I have pro	vided in order to apply for	and secure work w	vith this employer	is true, complete and	correct.	
I expressly authorize, without reservati professional), employers, public agenci application, resumé or job interview. I gathering and using truthful and non- furnishing such information about me	ies, licensing authorities and hereby waive any and all ri defamatory information, in	d educational insti ghts and claims I n	tutions and to oth nay have regardin	nerwise verify the accu ig the employer, its age	racy of all information pents, employees or repre	provided by me in this sentatives, for seeking,
I understand that this employer does nany applicant from consideration for e					ed for the purpose of lim	iting or eliminating
I understand that this application rema		, , ,			the employer and still w	rish to be considered
for employment, it will be necessary for	or me to reapply and fill out	a new application				
If I am hired, I understand that I am free employment at any time, with or without for employment for any specified period contrary and that no implied oral or wri-	it cause and with or without I or definite duration. I unde	prior notice, exceperstand that no supe	t as may be require ervisor or represer	ed by law. This applicat ntative of the employer	ion does not constitute as is authorized to make an	n agreement or contract y assurances to the
I also understand that if I am hired, I wrequire me to complete an I-9 Form in	will be required to provide p					
This Company does not tolerate unla excluding an applicant from consider disability, or any other protected state	wful discrimination in its ration for employment on	the basis of his or	her sex, race, colo	or, religion, national o	origin, genetic informat	tion, citizenship, age,
religion, national origin, genetic info and all complaints will be investigated			ther protected sta	atus. The Company ta	kes all complaints of ha	rassment seriously
I understand that any information p eliminate me from further considera						
DO NOT SIGN UNTIL YOU I certify that I have read, fully					ent.	
Signature of Applicant	Mary Mary All				Date	, , ,



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Page 2