

EMPLOYMENT APPLICATION



Farwest Tenant Improvements, Inc.
 6925 216th St. SW, Suite D & E
 Lynnwood, WA 98036
 Ph: (206) 930-7336

It is the policy of Farwest Tenant Improvements, Inc. to provide equal opportunity to all employees and applicants for employment regardless of race, religion, color, sex, sexual orientation, age and national origin.

Personal Information

Position applied for			Today's date		
Full Legal Name		Social Security Number			
Last	First	MI			
Address					
Street		City		State	Zip
Daytime Phone	Evening phone	Other names you have known by, if any:			
E-mail address			Referred By		

Experience

Complete the following section in detail, most recent employer or current employer first. You need not go back beyond 10 years. Please complete the following information, even if accompanied by resume.

Are you currently employed? Yes ___ No ___ Date you can start work: _____ Desired Salary: _____

Position	Employer	Address			
		Street	City	State	Zip
Type of Business	Immediate Supervisor	Supervisors Title		Phone Number	
Date Employed (Month/Year)	Salary		May we contact?	Reason for leaving	
From:	To:	Starting	Ending	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Describe Work Duties (Attach separate sheet if needed):					

Experience Continued

Position		Employer		Address				
				Street		City		State Zip
Type of Business		Immediate Supervisor		Supervisors Title		Phone Number		
Date Employed (Month/Year)		Salary		May we contact?		Reason for leaving		
				<input type="checkbox"/>	<input type="checkbox"/>			
From: To:		Starting	Ending	Yes	No	Attach separate sheet if needed		
Describe Work Duties (Attach separate sheet if needed):								
Position		Employer		Address				
				Street		City		State Zip
Type of Business		Immediate Supervisor		Supervisors Title		Phone Number		
Date Employed (Month/Year)		Salary		May we contact?		Reason for leaving		
				<input type="checkbox"/>	<input type="checkbox"/>			
From: To:		Starting	Ending	Yes	No	Attach separate sheet if needed		
Describe Work Duties (Attach separate sheet if needed):								
Position		Employer		Address				
				Street		City		State Zip
Type of Business		Immediate Supervisor		Supervisors Title		Phone Number		
Date Employed (Month/Year)		Salary		May we contact?		Reason for leaving		
				<input type="checkbox"/>	<input type="checkbox"/>			
From: To:		Starting	Ending	Yes	No	Attach separate sheet if needed		
Describe Work Duties (Attach separate sheet if needed):								

References

Give the names of two persons not related to you, whom you have known at least one year.

Name		Address				Phone Number	
		Street		City		State Zip	
Business/Professional Relationship		Years Known		Alternate Phone Number			
Name		Address				Phone Number	
		Street		City		State Zip	
Business/Professional Relationship		Years Known		Alternate Phone Number			

Education

- a. Circle the highest grade completed 1 2 3 4 5 6 7 8 9 10 11 12
- b. If you did not complete high school, do you have a high school equivalency diploma? Yes No

Name and Location of Institution	Hrs	Degree Received	Major or Specialty	Dates Attended

- c. If you expect to complete an educational program in the near future, please indicate what type of degree or program and expected completion date: _____

General Information

Have you ever been employed with Farwest Tenant Improvements, Inc.? If yes, when:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you currently on "lay-off" status with another employer and subject to recall?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If employment is offered, can you submit the original unexpired documents required by Department of Homeland Security/U.S. Citizenship and Immigration Services (Form I-9)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will you consent to a mandatory controlled substance test?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been asked to resign from a position as a result of a policy violation? If so, please describe circumstances:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a criminal offense (felony or misdemeanor)? If yes, please state the nature of the crime(s), when and where convicted and disposition of the case: <i>(Note: No application will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you under the age of 18?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Except for vacations and holidays, how many days were you absent from work during the past year and prior year? 0-5 days <input type="checkbox"/> 5-10 days <input type="checkbox"/> 11-15 days <input type="checkbox"/> 16-20 days <input type="checkbox"/> 21+ days <input type="checkbox"/> Comments:		
Except for vacations and holidays, how many days were you tardy to work during the past year and prior year? 0-5 times <input type="checkbox"/> 5-10 times <input type="checkbox"/> 11-15 times <input type="checkbox"/> 16-20 times <input type="checkbox"/> 21+ times <input type="checkbox"/> Comments:		
Willing to work the following shifts: Any Shift: <input type="checkbox"/> Weekend Shift: <input type="checkbox"/> Full-time work: <input type="checkbox"/> Part-time work: <input type="checkbox"/> Temporary: <input type="checkbox"/> Seasonal: <input type="checkbox"/>		
If position requires, are you available for overtime?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Tools List

Check all tools you have to bring to work on a daily basis as needed:

- | | | | |
|-------|----------------------------|-------|----------------------------------|
| _____ | Tool belt with bags | _____ | Nail sets |
| _____ | Measuring tape (30') | _____ | C-Clamps |
| _____ | Speed square | _____ | Orbital sander |
| _____ | Framing square | _____ | Belt sander |
| _____ | Carpentry Pencils | _____ | Hammer tacker |
| _____ | Framing hammer | _____ | Powder actuated nail set gun |
| _____ | Finish hammer | _____ | Extension cords |
| _____ | Utility knife | _____ | Air hose |
| _____ | Retractable chalk line | _____ | Screwdrivers |
| _____ | Linesman Pliers | _____ | Socket wrench set |
| _____ | Line level | _____ | Wrenches (crescent and pipe) |
| _____ | Torpedo level | _____ | Laser level |
| _____ | Two-foot level | _____ | Cat's paw (nail puller) |
| _____ | Four-foot level - magnetic | _____ | Flat pry bar |
| _____ | Cordless drill/driver | | ADDITIONAL TOOLS YOU HAVE |
| _____ | Circular saw | _____ | _____ |
| _____ | Laminate router | _____ | _____ |
| _____ | Jig saw | _____ | _____ |
| _____ | Reciprocating saw | _____ | _____ |
| _____ | Sliding compound miter saw | _____ | _____ |
| _____ | Portable table saw | _____ | _____ |
| _____ | Air compressor | _____ | _____ |
| _____ | Nail gun | _____ | _____ |
| _____ | Finish saw | _____ | _____ |
| _____ | Chisel | _____ | _____ |

Please read the following carefully before signing this application:

The facts set forth above are true and complete. I authorize Farwest Tenant Improvements, Inc. to obtain information about me from previous employers, including relevant facts and opinions about my work and work habits, and I release from liability or responsibility all persons or corporations requesting or supplying such information (____ initial here).

I expressly authorize any educational institutions that I have attended to provide transcripts and degree status (____ initial here).

I understand that any falsified information or significant omission on this application may disqualify me from further considerations for employment, and that if employed, false statements of incorrect information on this application shall be considered justification for dismissal if discovered at a later date (____ initial here).

If employed by Farwest Tenant Improvements, Inc. I agree to adhere to the policies and procedures, although I understand that my agreement to do so does not create a contract of employment between myself and Farwest Tenant Improvements, Inc. (____ initial here).

I understand that if employed, I am employed AT WILL and that no contract between myself and this Employer is created by my completion of this application, my receiving employment, my continued employment or my receiving benefit of employment of any type.

I further understand if business needs require, as a condition of continued employment, Farwest Tenant Improvements, Inc. may change work assignments, schedules, and/or locations (____ initial here).

I also understand if I am offered employment by Farwest Tenant Improvements, Inc. it is contingent on my ability to furnish proof of my identity and U.S. citizenship, or my legal authorization to work in the U.S., as required by federal law. Failure to do so and/or lack of proper documentation (within 3 days of my receipt of an offer of employment) will result in termination per the Immigration Reform and Control Act of 1986 (____ initial here).

Signature: _____ Date: _____

AUTHORIZATION FORM FOR CONSUMER REPORTS

In connection with your application for employment (including contract for services), understand that consumer reports or investigative consumer reports which may contain public record information may be requested or made on you including consumer credit, criminal records, driving record, education, prior employer verification, workers compensation claims and others. These reports will include experience information along with reasons for termination of past employment. Further, understand that information from various Federal, State, local and other agencies which contain your past activities will be requested. A consumer report containing injury and illness records and medical information may be obtained only after a tentative offer of employment has been made.

By signing below, you hereby authorize without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. You further authorize ongoing procurement of the above-mentioned reports at any time during your employment (or contract).

You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

You have the right to make a request of Farwest Tenant Improvements, Inc., upon proper identification and the payment of any legally permissible fees, for the information in its files on you at the time of your request.

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about you to furnish Farwest Tenant Improvements, Inc. with any and all background information in their possession regarding you, in order that your employment qualifications may be evaluated.

For California, Minnesota or Oklahoma applicants only, if you would like to receive a copy of the consumer report, if one is obtained, please check this box. If checked and you are a California applicant, a copy of the consumer report will be sent within three (3) days of the employer receiving a copy of the consumer report.

For California applicants only, if public record information about your character, general reputation, personal characteristics, and mode of living is obtained without using a consumer reporting agency, you will be supplied a copy of the public record information within seven (7) days of the employer's receipt unless you check this box where you hereby waive your right to obtain a copy of the consumer report.

Print your Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Social Security Number: _____

Driver's License State: _____ **License Number:** _____

The following is for identification purposes only to perform the background check:

Date of Birth (MM/DD/YYYY): _____ **Gender (M or F):** _____

Other or Former Names: _____

Signature: _____

NOTICE TO APPLICANTS/EMPLOYEES REGARDING CONSUMER REPORTS AND/OR INVESTIGATIVE CONSUMER REPORTS

A consumer report and/or an investigative consumer report including information concerning your character, employment history, general reputation, personal characteristics, police record, credit, education, qualifications, motor vehicle record, and mode of living may be obtained in connection with your application for and/or continued employment with the company. **A consumer report and/or an investigative consumer report may be obtained at any time during the application process or during your employment with the Company.** These reports may include experience information along with reasons for termination of past employment. Further, understand that information from various Federal, State, local and other agencies which contain your past activities may be requested. A consumer report and/or an investigative consumer report containing injury and illness records and medical information may be obtained after a tentative offer of employment has been made.

This information will, in whole or part, be obtained from:

MicroBilt Corporation
1640 Airport Road, Suite 115 770-218-4400
Kennesaw, GA 30144 770-218-4997

Please be advised that you have a right to inspect the files that the Consumer Reporting Agency may have on you during normal business hours and upon you furnishing proper identification.

Before any adverse action is taken, based in whole or in part on the information contained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the reporting agency, a summary of your rights under the Fair Credit Reporting Act, as well as additional information on your rights under the law.

Print your name: _____

Signature: _____