SANFORD and HAWLEY, INC.

1790 Farmington Avenue Unionville, Connecticut 06085-0545 (860) 673-3213, (860) 675-2171 (fax)

APPLICATION FOR EMPLOYMENT

Sanford and Hawley, Incorporated is an Equal Opportunity Employer that employs in compliance with all applicable laws. We do not discriminate because of sex, sexual orientation, age, race, color, religious creed, marital status, national origin, ancestry, disability, handicap or other legally protected status. Equal access to programs, service and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and job interview process should notify an officer of Sanford and Hawley, Incorporated.

		Date:
PERSONAL INFORMATION	V	
Name		
Address		
City	State	Zip Code
Telephone	Mobile/Beeper/Oth	ner Phone No
Date and Month of Birth (not	year)	
If at the above residence less	s than 3 years, list all residences for the p	past three years.
Address		
Address(Attach a se	eparate sheet if necessary)	
Are you prevented from lawf	fully becoming employed in this country	because of Visa or Immigration status? \square Yes \square
(Proof of citizenship or immi	gration status will be required on employ	vment).
EMPLOYMENT DESIRED Position for which you are a	applying:	
□ Full-time □ Part	-time □ Temporary □ Seasonal	
Are you able to meet the atte	endance requirements of the position?	□Yes □No

How did you hear about us and the position for which you are applying?
Are you employed now? ☐ Yes ☐ No
Can you travel if the job requires it? ☐ Yes ☐ No
Will you work overtime if asked? ☐ Yes ☐ No
What compensation do you desire?
Have you ever applied for employment with us? $\ \square$ Yes $\ \square$ No
If yes, when
Were you ever previously employed by us? ☐ Yes ☐ No
If yes, when?
In what position?
Do any of your friends or relatives work here? ☐ Yes ☐ No
If yes, explain
Do you have any lumber yard or building material distribution experience? ☐ Yes ☐ No If yes, explain:
Do you have any carpentry, construction or building experience? ☐ Yes ☐ No
If yes, explain:

Please list Inc.:	t any special skills you have that would be relevant to your potential employment with Sanford and Hawley,
Please list	t any professional, trade, business, or civic activities and offices held:
Have you	served in the military? □ Yes □ No If yes, Branch and dates.
•	rved in the military service of the United States, did you receive any special training, which will help you ne job for which you are applying? \Box Yes \Box No
If yes, plea	ase describe:
lf your em	ployment will include operating a company vehicle on public roads, please provide your :
Driver's lic	cense #: and the state it is issued by:
	oplicants who may operate a commercial motor vehicle (gvw >26,000 lbs) must complete our Driver Supplement.
Do you ha	ave more than one driver's license issued to you?

FORMER EMPLOYERS

List below your work experience, starting with your present or last place of employment. (You may include verifiable volunteer work experience.)

URRENT Employer:Supervisor's Name:						
Address:	City:		_ State:	_ Phone <u>: (</u>)	
Position Held:		From:	To:			
Reason for Leaving:						
FORMER Employer:			Supervisor's N	ame:		
Address:	City:		_ State:	Phone: ()	
Position Held:		From:	To:			
Reason for Leaving:						
FORMER Employer:			Supervisor's N	ame:		
Address:						
Position Held:		From:	To:			
Reason for Leaving:						
FORMER Employer:		;	Supervisor's N	ame:		
Address:						
Position Held:		From:	To:			
Reason for Leaving:						
May we contact your present emp	bloyer at this time?	Yes □ No				
Have you ever been discharged	•					
If yes, please explain:						

EDUCATION

Highest grade completed (please circle	r)	
Grade School 12345678 High	School 9 10 11 12	
College 1234 other:		
Name of last school attended:		
Vocational or trade school:		
Course of study:		
REFERENCES		
Employment and/or Personal		
Provide at least two (2) personal and tv	vo (2) employment(Co-Workers) - other than re	elatives.
Name:	Occupation:	
Address:	City:	State:
Phone: ()		
Name:	Occupation:	_
Address:	City:	State:
Phone: ()		
Name:	Occupation:	
Address:	City:	State:
Phone: ()		
Name:	Occupation:	
Address:	City:	State:
Phone: ()		

NOTICE TO APPLICANT APPLICANT MUST READ & SIGN

I, the undersigned Applicant, understand that any employment with Sanford and Hawley, Inc. will be on a forty five (45) day introductory basis. I also understand that my employment during this period, as well as thereafter, may be terminated, with or without cause or notice, at any time, at my option or at the option of Sanford and Hawley, Inc. I understand that no company representative, including any officer or manager, has any authority to enter into any agreement for continuing employment for any specific period of time or which is contrary to the foregoing unless such is an explicit written document signed by both myself and the Company president.

I give Sanford and Hawley, Inc. permission to contact any and/or all previous employers and references. I hereby authorize my current employer, previous employers, and references to provide all information requested of them by Sanford and Hawley, Inc. I authorize Sanford and Hawley, Inc. to obtain, use and rely upon that information in relation to this application and any supplements. I agree to release, indemnify, and hold harmless Sanford and Hawley, Inc., my current employer, my previous employers and my references from any and all liability associated with or resulting from their disclosure or acceptance of this information.

I hereby authorize Sanford & Hawley, Inc. and its agents, subcontractors, and/or vendors to investigate my background to ascertain any and all information contained in this application and to determine my qualification for the position for which I am applying. I hereby release my current employer, my previous employers and persons named in this application from any and all liability for any damages on account of his/her/their furnishing any information, data, and/or opinions.

I acknowledge that this investigation may include an Investigative Consumer Report, including information regarding my character, credit experience, general reputation, driving history, personal characteristics and mode of living as well as information obtained from social networking sites. I hereby explicitly authorize such investigation(s). I hereby explicitly authorize such investigation(s). I also understand that the foregoing is intended as notice required pursuant to The Fair Credit Reporting Act.

I understand that this application for employment shall be considered active for a period of time not to exceed 30 days. I agree that should I wish to be considered for employment beyond this time period, I must inquire as to whether or not applications are being accepted at that time.

I have provided truthful and complete responses to all inquiries in this application and understand that the discovery of any falsification or omission shall constitute a ground for immediate employment termination without notice and at any time.

If employed by Sanford and Hawley, Inc., I will abide by its rules and regulations, which I understand, are subject to change. I understand and agree that any handbooks and/or policy or procedure manuals and/or any supplement(s) to such, which I may receive, will not constitute an employment contract, but will only be a recital of Sanford & Hawley Inc.'s current policies.

I understand that this application is not an employment contract and that, if hired, my employment and compensation can be terminated, with or without cause, at any time at the option of either Sanford & Hawley Inc. or myself. I acknowledge that if hired, I will be an at will employee.

I certify that this application was completed by me and that all entries on it and in it are true and complete to the best of my knowledge.

Applicant's Signature		
Date		

Notice: All Applicants must read and sign the attached Notice to Applicant, Consent to Conduct Investigation,

Notice: All CDL Driver Applicants: In addition to this application, you must complete and sign a **separate <u>Driver</u> <u>Supplement.</u>**

Notice: It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment.

An employer who violates this law shall be subject to criminal penalties and civil liability.

Notice to Applicant

CONSENT TO CONDUCT INVESTIGATION

I understand that Sanford & Hawley Inc. will utilize the services of a consumer reporting agency (or agencies) to verify the information I have provided on my employment application.

I understand the investigation may include obtaining information covering up to the last seven (7) years regarding my work habits, education, general reputation, personal characteristics, and mode of living.

I understand such information may be obtained by direct or indirect contact from former employers, schools, financial institutions, social networking sites, landlords and public agencies and through personal interviews with my neighbors, friends and associates, acquaintances or other persons who may have such knowledge.

I also understand that before I am denied employment based on information obtained in any consumer report, I will be provided a copy of the report and a description in writing of my rights under the Fair Credit Reporting Act.

I understand if I disagree with the accuracy of any information in the report, I must notify Sanford & Hawley Inc. within two (2) days of my receipt of the report. If I notify Sanford & Hawley Inc. within two (2) days of the receipt of the report that I am challenging information in the report, Sanford & Hawley Inc., will not make a final decision on my employment status until after I have had the opportunity to address the discrepancy.

I hereby consent to this investigation and authorize Sanford & Hawley Inc. to procure a report (or reports at their sole discretion) on my background from a consumer reporting agency.

Signature c	of	applicant	
Dated:			

Sanford and Hawley, Inc.

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I understand that it will be mandatory for me to accept direct deposit of my bi-weekly earnings. I understand that my entire bi-weekly pay must be deposited in the bank account of my choice. I further understand that pay is paid bi-weekly.

Applicant's	Name (please print)
Applicant's	Signature
Date	

SANFORD AND HAWLEY, INC.

1790 FARMINGTON AVENUE UNIONVILLE, CT 06085-0545 860-673-3213

Post Offer, Pre-Employment Physical Examination and Work Assessment Test Acknowledgement, Authorization, Consent and Hold Harmless

Name:
Address:
SSN:
Note: Complete this if you are applying (or have applied) for a yard, driver, millshop or other position requiring heavy lifting or other strenuous activity with Sanford and Hawley, Inc. ("S&H").
WARNING: Read below carefully before signing.
By signing below, you acknowledge that if you are (or if you have been) offered a yard, driver, millshop or other position which will require heavy lifting or other strenuous activity that you will be required to have a Physical Examination (which will comply with the Federal Motor Carrier Safety Act if your position will include driving) and a Work Assessment Test post offer but prior to commencing employment with S&H. Both of these will be conducted by third parties. The purpose of these is to help ensure that you are able to perform the essential functions of the position you have been offered before you start in that position. By signing below you acknowledge you must successfully complete both the Physical Examination and Work Assessment Test before commencing employment and you hereby affirmatively state that if you undertake these, it will be of your own free will and at your own risk of injury. You also acknowledge that you can elect not to participate in these, however, should you so elect, you will not be able to be employed in a position with S&H which requires heavy lifting or other strenuous activity which positions include, but are not necessarily limited to, yard, driver and millshop positions. Thus, election not to participate may likely preclude employment with S&H.
There are risks of injury and/or other harm including death with both the Physical Examination and the Work Assessment Test. Either could aggravate an existing injury or condition or cause a new injury or condition. By signing below, you acknowledge these risks, you agree to assume these risks and you agree to indemnify, defend and hold harmless S&H and its employees, officers, directors and insurers from any and all injuries, harms, claims, liabilities, suits, demands, costs, expenses, medical costs and expenses, fees, penalties, fines, settlements, judgments, losses and attorneys' fees which are in any way related to or caused, whether directly or indirectly, by your participation in a Physical Examination and/or Work Assessment Test. You hereby acknowledge and agree that the foregoing explicitly includes, but is not limited to, injuries and harms to you including death.
As per the above, by signing below you explicitly consent to both the Physical Examination and Work Assessment Test if you are offered a position you wish to accept, acknowledge that there are risks, assume all of the risks, and agree to hold others harmless.
I certify that I have thoroughly read the above, understand all of the above and agree with all of the above.
Sign: Date:
Print Name