

# Stardust Non-Profit Building Supplies

## APPLICATION FOR EMPLOYMENT

*Stardust Non-Profit Building Supplies, Inc. is **An Equal Opportunity Employer.** Stardust Non-Profit Building Supplies policy prohibits discrimination or harassment on the basis of race, color, religion, ancestry, national origin, age, gender, genetics, sexual orientation, or marital, familial, or disability status or status as a covered veteran or any other legally protected status. Stardust Non-Profit Building Supplies supports and promotes equal employment opportunity, human dignity, and racial, ethnic, and cultural diversity. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors.*

Answer each question fully and accurately. Incomplete applications may be disqualified. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for signature on back of application.

Job Applied for \_\_\_\_\_ Today's Date \_\_\_\_\_

Seeking: Full-time  Part-time  Temporary

When could you start work? \_\_\_\_\_

### GENERAL

\_\_\_\_\_  
 Last Name                      First Name                      Middle Name                      Telephone Number

\_\_\_\_\_  
 Address                      City                      State                      Zip Code                      Email Address

Are you 18 years of age or older? . . . . . Yes  No   
 (If you are hired, you may be required to submit proof of age.)

If hired, can you furnish proof you are eligible to work in the U.S.? . . . . . Yes  No

Have you ever applied here before?      Yes       No       If yes, when? \_\_\_\_\_

Were you ever employed here?      Yes       No       If yes, when? \_\_\_\_\_

Are you a National Service Alumni?      Yes       No       If yes, AmeriCorp \_\_\_ Peace Corp \_\_\_

Have you ever been convicted of any law violation? (Include any plea of "guilty" or "no contest." Exclude minor traffic violations.) . . . . . Yes  No

If yes, give details \_\_\_\_\_  
 (A conviction will not necessarily disqualify an applicant for employment.)

If employed, do you expect to be engaged in any additional business or employment outside of our job? . . . . . Yes  No

If yes, give details \_\_\_\_\_

# EDUCATION

List Name and Address of Schools		Number of Years Completed	Diploma/ Degree/ Certificate
High School or GED			
College or University			
Subjects Studied			
Vocational or Technical			
Subjects Studied			

## SKILLS AND ABILITIES

What skills or additional training do you have that are related to the job for which you are applying? \_\_\_\_\_  
 \_\_\_\_\_

What machines or equipment can you operate that are related to the job for which you are applying? \_\_\_\_\_  
 \_\_\_\_\_

Do you have a valid driver's license? . . . . . Yes  No

Do you have a clean driving record? . . . . . Yes  No

Have you had your driver's license suspended or revoked in the last 3 years? . . . . . Yes  No   
 If yes, give details: \_\_\_\_\_

Are you able to lift 75 lbs.? . . . . . Yes  No

List professional, trade, business or civic activities and offices held.  
 (Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability, genetic information or other protected status.)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

# WORK HISTORY

List names of employers in consecutive order with present or last employer listed first for the past 10 years. Account periods of unemployment lasting more than one year. If self-employed, give firm name and supply business references.

**Note: A job offer may be contingent upon acceptable references from current and former employers.**

Name, Address and Telephone of Employer	Employed		Pay		Reason for leaving
	From (mo/yr)	To(mo/yr)	Start	Final	
			\$	\$	
Title	Duties				Supervisor(s)

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	From (mo/yr)	To(mo/yr)	Start	Final	
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Name, Address and Telephone of Employer	Employed		Pay		Reason for leaving
	From (mo/yr)	To(mo/yr)	Start	Final	
			\$	\$	
Title	Duties				Supervisor(s)

# REFERENCES

Have you worked or attended school under any other names? . . . . . Yes  No

If yes, give names: \_\_\_\_\_

Are you presently employed? . . . . . Yes  No

If yes, whom do you suggest we contact? \_\_\_\_\_

Have you ever been fired from a job or asked to resign? . . . . . Yes  No

If yes, please explain: \_\_\_\_\_

Give three references, not relatives or former employers.

Name	Address	E-mail	Phone

## AFFIDAVIT, CONSENT AND RELEASE

### PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

Stardust is a drug-free workplace with safety-sensitive positions. Use of alcohol and legal or illegal drugs alter employees' judgement resulting in increased safety risks, workplace injuries, and faulty decision making. Therefore, working for Stardust after use of alcohol, a controlled substance, or abuse of any other substance is absolutely prohibited. (*Drug policy in its entirety will be provided at time of interview.*)

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I authorize and understand that any offer of employment is contingent upon passing a criminal background check. I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

**I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT IF HIRED IT IS AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.**

I have read, understand, and by my signature consent to these statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This application for employment will remain active for one year.