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## EMPLOYMENT APPLICATION

It is the policy of E-Z Windows, Inc. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

**Applicant Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Number of years at this address:** \_\_\_\_ **Day phone:** \_\_\_\_\_ **Eve phone:** \_\_\_\_\_  
**Social Security Number:** \_\_\_\_\_

**Who should be contacted if you are involved in an emergency?**  
**Contact Name:** \_\_\_\_\_ **Relationship to you:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City/State/Zip:** \_\_\_\_\_  
**Day phone:** \_\_\_\_\_ **Eve phone:** \_\_\_\_\_

**Who referred you to our company?** \_\_\_\_\_ **Are you at least 18 years old?**  Yes  No

**Are you willing to work any shift, including nights and weekends?**  Yes  No

**If no, please state any limitations:** \_\_\_\_\_

**If you are offered employment, what date would you be available to begin work?** \_\_\_\_\_

**Are you legally eligible for employment in the United States?** \_\_\_\_\_

**Are you able to perform the essential functions of the job position with or without reasonable accommodation?**  Yes  No

**What reasonable accommodation, if any, would you require?** \_\_\_\_\_

**Are you currently employed?**  Yes  No **Salary Desired?** \_\_\_\_\_

**Have you ever been convicted of any crime, including traffic violations?**  Yes  No

**If yes, please describe:** \_\_\_\_\_

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF EMPLOYMENT.

### Applicant's Education and Training:

*List your education and training.*

**High School Name and Address:** \_\_\_\_\_

**Last Grade Completed:** 9 10 11 12 **Diploma?** Yes  No

**College Name and Address:** \_\_\_\_\_

**Did you receive a degree?** Yes  No **If yes, degree received:** \_\_\_\_\_

**Other Training (graduate, technical, vocational):** \_\_\_\_\_

**Awards, Honors, Special Achievements:** \_\_\_\_\_

**Applicant's Skills: List any skills that may be useful for the job you are seeking:**

\_\_\_\_\_  
\_\_\_\_\_

**Applicant Employment History:**

List your current or most recent employment first.

**Employer**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Dates of Employment (Month/Year): \_\_\_\_\_

**Employer**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Dates of Employment (Month/Year): \_\_\_\_\_

**Employer**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Dates of Employment (Month/Year): \_\_\_\_\_

**Employer**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Dates of Employment (Month/Year): \_\_\_\_\_

**References:**

List any two people (non-relative) who would be willing to provide a reference for you.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**Please provide any other information that you believe should be considered:**

\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION**

I certify that the information provided on this Application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my Application, or if employment commences immediate termination.

I authorize E-Z Windows, Inc. to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Principal, the employment relationship will be entirely voluntary in nature. In other words, with appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer would have the same right. Moreover, no agent, representative, or employee of E-Z Windows, Inc., except in a specific written contract of employment signed on behalf of the organization by its Principal, has the power to alter or vary the voluntary nature of the employment relationship.

**I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.**

\_\_\_\_\_  
**APPLICANT SIGNATURE**

\_\_\_\_\_  
**DATE**