

APPLICATION FOR EMPLOYMENT

Applicant: Thank you for your interest in our organization. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment depends solely on your qualifications. To enable us to evaluate this application properly, please answer all questions carefully and as completely as possible.

Name								Social Security	No		
(Last) (First)		(Middle)									
Home Address _	(Street)		(City)	(State)	- 1	Zip)		Home Phone:			
E-Mail:				(State)	(.	2 19)		Cell Phone:			
GENERAL											
Position applying	for:		Employ	ment desired:				Available	Desired earnings:		
					Full o	r Part-tir	me 🗌	to start:			
			Part-tim	ie only					(be specific)		
Days available to Monday	work: Thurs	42.4	How ma	ny hours can y	ou w	ork per v	week?	Can you provide proof that you are			
	Friday							eligible for employment in the U.S.? Yes No			
Wednesday	Satur										
Notice: Regular b	ousiness hours	for the ReStore						If under 18, please list age:			
is 9:00am-6:00pn	n MonSat.										
Have you ever been convicted of a criminal			Do you	haye a valid Dri	iver's	Licenso	?	Have you had any accidents or moving			
offense?	en convicted c	a Cilillia	·	Do you have a valid Driver's License? Yes No					violations in the past 3 years?		
Yes 🗌 No 🗌								Yes No			
If yes, explain:			Type:						How many?		
			Operato	or Comme	rcial	(CDL) L	_	Explain:			
EDUCATION/TRA	INING										
									Degree		
							Graduated?		Diploma		
School	Nar	ne		Location		Yes	No	Completed	l Certificate		
High											
College											
Graduate or											
Trade School											
Military											
							_				
REFERENCES: Ple	ase list three i	ndividuals who o	could serve	as a work or pr	otess	sional ref	terence.				
Name		Address			Phone No.		How does this person know you?				
· ·						-	, , , , , , , , , , , , , , , , , , , ,				
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EMPLOYMENT RECORD

Please list your work experience for at least the past five years beginning with your most recent job held. Attach additional sheets if necessary.

	Employed				Ending			
Name and address of employer:	Fro	From To			Salary	Reason for leaving	Supervisor's name	
	<u>Mo.</u>	<u>Yr.</u>	<u>Mo</u> .	<u>Yr.</u>				
	Job ti	tle:						
	D		- E -I A					
	Descr	iption	or aut	ies:				
Phone #								
		F	امدييما		Fooding.			
Name and address of employer:	Fro		loyed Т	·o	Ending Salary	Reason for leaving	Supervisor's name	
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	loh ti	tle:						
	Descr	iption	of dut	ies:				
Phone #								
	-							
		Employed			Ending			
Name and address of employer:	Fro	m <u>Yr.</u>	<u>Mo</u> .	O <u>Yr.</u>	Salary	Reason for leaving	Supervisor's name	
	Mo.	<u>11.</u>	<u>ivio</u> .	11.				
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	La la Air	ul						
	Job til	tle:						
	Descr	iption	of dut	ies:				
Phone #								
		Emp	loyed		Ending			
Name and address of employer:	From To			ō	Salary	Reason for leaving	Supervisor's name	
, ,	Mo.	<u>Yr.</u>	Mo.	<u>Yr.</u>	,		<u> </u>	
	Job ti	tle:						
	Descr	iption	of dut	ies:				
Phone #								
May we contact your against and	om2 Vee [N F		اند مور	التلامية والمرام	a contact?		
May we contact your present employ	err res	NO [It)	es, wn	om snould w	e contact?		
Please account for any periods of une	mployment i	in the _l	past fiv	e year	s:			
M/hat aposial skills lines.		المسط	امط	- or! - :-	00 not c=::	and alcoupers developers		
What special skills, knowledge, talent	s, or other Jo	n-Leig.	rea ext	berienc	es, not cover	eu eisewriere, do you nave?		

In exchange for the consideration of my job application by Greate	r Des Moines Habitat for	· Humanity, Inc.(hereinaft	er called "the Company")
I agree that:				

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Greater Des Moines Habitat for Humanity, Inc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and Greater Des Moines Habitat for Humanity, Inc. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I understand that, in connection with the routine processing of your employment application the Company screens all potential staff on the sexual offender registry. By completing this application, I am submitting to such inquiry.

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Did you complete this application yourself? Yes	No If not, who did?	
Signature		Date

By transmitting electronically, I certify everything to be true and agree to the terms listed on this application for employment.