

Caperton Furnitureworks is an Equal Opportunity Employer and does not discriminate on the basis of gender, age, race, color, religion, national origin, mental or physical disability, genetic information or marital or veteran status. No application will be rejected as a result of disability that, with reasonable accommodations, does not prevent performance of the essential job duties.

Applying for:  Production  Warehouse  Driver  Other \_\_\_\_\_

Applying for:  Full Time  Part Time  Seasonal  Temporary

### **1. PERSONAL INFORMATION**

Your name \_\_\_\_\_  
Last First Middle

Your address \_\_\_\_\_  
Street (or P.O. Box)

\_\_\_\_\_ City State Zip

1<sup>st</sup> Phone Number: \_\_\_\_\_ 2<sup>nd</sup> Phone Number: \_\_\_\_\_

Social Security (last 4): \_\_\_\_\_

### **2. WORK EXPERIENCE**

Provide your employment history for at least the past ten years, starting with your most recent job. Provide accurate dates of employment and explain any gaps between jobs. Unless you indicate to the contrary, we assume we have your permission to contact these employers.

**1)** \_\_\_\_\_

Employer	Supervisor's Name
City	State
From (Month/Year)	To (Month/Year)
\$	Wage
	Hours per Week

Job Title & Responsibilities / Equipment Operated: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**2)**

Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone Number \_\_\_\_\_

From (Month/Year) \_\_\_\_\_ To (Month/Year) \_\_\_\_\_ \$ \_\_\_\_\_ Wage \_\_\_\_\_ Hours per Week \_\_\_\_\_

Job Title & Responsibilities / Equipment Operated: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**3)**

Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone Number \_\_\_\_\_

From (Month/Year) \_\_\_\_\_ To (Month/Year) \_\_\_\_\_ \$ \_\_\_\_\_ Wage \_\_\_\_\_ Hours per Week \_\_\_\_\_

Job Title & Responsibilities / Equipment Operated: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**4)**

Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone Number \_\_\_\_\_

From (Month/Year) \_\_\_\_\_ To (Month/Year) \_\_\_\_\_ \$ \_\_\_\_\_ Wage \_\_\_\_\_ Hours per Week \_\_\_\_\_

Job Title & Responsibilities / Equipment Operated: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**5)**

Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone Number \_\_\_\_\_

From (Month/Year) \_\_\_\_\_ To (Month/Year) \_\_\_\_\_ \$ \_\_\_\_\_ Wage \_\_\_\_\_ Hours per Week \_\_\_\_\_

Job Title & Responsibilities / Equipment Operated: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**6)**

Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone Number \_\_\_\_\_

From (Month/Year) \_\_\_\_\_ To (Month/Year) \_\_\_\_\_ \$ \_\_\_\_\_ Wage \_\_\_\_\_ Hours per Week \_\_\_\_\_

Job Title & Responsibilities / Equipment Operated: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**7)**

Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone Number \_\_\_\_\_

From (Month/Year) \_\_\_\_\_ To (Month/Year) \_\_\_\_\_ \$ \_\_\_\_\_ Wage \_\_\_\_\_ Hours per Week \_\_\_\_\_

Job Title & Responsibilities / Equipment Operated: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**3. SPECIAL INFORMATION REQUIRED FOR TRUCK DRIVING APPLICANTS ONLY**

Drivers License Number \_\_\_\_\_ State Issuing License \_\_\_\_\_ Expiration Date \_\_\_\_\_

Drivers License Number \_\_\_\_\_ State Issuing License \_\_\_\_\_ Expiration Date \_\_\_\_\_

Drivers License Number \_\_\_\_\_ State Issuing License \_\_\_\_\_ Expiration Date \_\_\_\_\_

List all traffic violations in past 5 years which resulted in a conviction, or forfeited bond or collateral.

---

---

---

List all traffic accidents in past 5 years including date, nature of, fatalities, personal injuries.

---

---

---

Have you ever had any denial, revocation or suspension of any license, permit or privilege to operate a motor vehicle?  Yes  No

If Yes, please describe in full. \_\_\_\_\_

---

---

Have you ever been convicted of a crime, excluding misdemeanors?  Yes  No

If Yes, please describe in full \_\_\_\_\_

---

---

(Note that conviction of a crime is not an automatic bar to employment. All circumstances will be considered.)

Have you lived at your current address for the past three years?  Yes  No

If No, please list your address of the past three years \_\_\_\_\_

---

---

**Driver Applicants**

Federal law requires us to notify you before an application is submitted that the employers listed in Section 2 of this application may be contacted for the purpose of background checks according to Federal Motor Carriers Safety Regulations Part 391.23.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**4. EDUCATION AND SKILLS**

Please list all High Schools, Colleges, Universities and Vocational or Trade Schools you have attended.  
Name of School Grade Completed or Degree

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

**5. EMPLOYMENT DESIRED**

When can you report to work? \_\_\_\_\_

Can you perform the essential functions of the position for which you are applying?  Yes  No  
If no, please explain. (If you have any question as to what functions are applicable to the position for which you are applying, please ask the interviewer this question.)

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

Are you legally eligible to be employed in the United States?  Yes  No  
(Proof of identity and eligibility will be required upon employment)

Are you under the age of 18 years?  Yes  No

What wage do you expect? \_\_\_\_\_

Have you ever worked under another name?  Yes  No  
If Yes, what was it and what was the reason for the change?

\_\_\_\_\_

Have you ever been employed by Tom Seely Furniture or Caperton Furnitureworks?  Yes  No  
If Yes, please complete the following:

Date employed \_\_\_\_\_ to \_\_\_\_\_

Department \_\_\_\_\_ Supervisor \_\_\_\_\_

Reason for leaving \_\_\_\_\_

If you are presently employed, may we contact your current employer?  Yes  No

Have you ever been convicted, pled guilty, no contest, or forfeited bond or bail for any crime other than traffic violations?  Yes  No  
If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

(Note that conviction of a crime is not an automatic bar to employment. All circumstances will be considered.)

**6. PLEASE READ CAREFULLY BEFORE SIGNING:**

If hired, I will abide by the rules and policies of Caperton Furnitureworks. I understand that my employment and compensation can be terminated at any time, with or without cause, and with or without notice, at the option of Caperton Furnitureworks or myself. I understand that the CEO is the only person who will ever have the authority to create any other terms of employment and/or to enter into any employment contract and that all such contracts must be in writing and signed by both parties. However, I also understand that unless otherwise stated in an employment contract, the Company may change, withdraw and interpret other policies (including wages, hours and working conditions) as it deems appropriate.

I authorize my current and previous employers (except as noted) to give any and all information regarding my employment, and I release Caperton Furnitureworks and my previous supervisors and employers from any and all liability and from any damage that may result from the release of such information.

I understand and acknowledge that I may be required to submit to a physical examination, including drug test. Additionally, I hereby authorize the release of the results of such an examination to Caperton Furnitureworks for their use in evaluating my suitability for employment. Further, I release the examining facility and Caperton Furnitureworks from any and all liability and from any damage that may result from the release of such information.

I certify that I have answered this application truthfully and have not withheld any information relative to my application. I understand that any falsification, misrepresentation, or omission, as well as any misleading statements on the application or supporting documents, generally will result in denial of employment or immediate termination. I authorize Caperton Furnitureworks to verify any information I have provided on this application and any supporting documents, as required by DOT Code 49CFR §172.802.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Caperton Furnitureworks  
5270 Valley Road  
Berkeley Springs, WV 25411  
eoe