

	Date Submitted
religion, natior	n Equal Opportunity Employer and does not discriminate on the basis of gender, age, race, color, nal origin, mental or physical disability, genetic information or marital or veteran status. No application ed as a result of disability that, with reasonable accommodations, does not prevent performance of job duties.
Applying for:	☐ Full Time ☐ Part Time
Interested in:	☐ Woodshop ☐ Finishing ☐ Shipping ☐ Delivery/Driver
	☐ Customer Service ☐ Maintenance ☐ Other
1. PERSONAL	_ INFORMATION
Your Address _.	
City	State Zip Code
Primary Phone	e Second Phone
Email Address	s Social Security Number (Last 4 digits)
2. WORK EXP	PERIENCE
•	employment history for at least the past ten years, starting with your most recent job. Unless you e contrary, we assume we have your permission to contact these employers.
(1) Employer _	Supervisor's Name
City	State Phone
Dates of Empl	loyment: Start Date End Date Hours per Week
	sponsibilities / Equipment Operated:
Passan for Lar	aving



(2) Employer		Super	visor's Name	
City		State _	Phone	
Dates of Employment: Start Date	End Date	MONTH/YEAR	ours per Week	
Job Title & Responsibilities / Equipment Opera				
Reason for Leaving				
(3) Employer		Super	visor's Name	
City		State _	Phone	
Dates of Employment: Start Date	End Date	MONTH/YEAR	ours per Week	
Job Title & Responsibilities / Equipment Opera				
Reason for Leaving				
(4) Employer		Super	visor's Name	
City		State _	Phone	
Dates of Employment: Start Date	End Date	MONTH/YEAR	ours per Week	
Job Title & Responsibilities / Equipment Opera	ated:			
Reason for Leaving				



(5) Employer	Supervisor's Name
City	State Phone
Dates of Employment: Start Date End Date	Hours per Week
Job Title Reason for Le	
(6) Employer	Supervisor's Name
City	State Phone
Dates of Employment: Start Date End Date	Hours per Week
Job Title Reason for Le	aving
(7) Employer	Supervisor's Name
City	State Phone
Dates of Employment: Start Date End Date	Hours per Week
Job Title Reason for Le	
3. EDUCATION AND SKILLS	
Please list all High Schools, Colleges, Universities and Vocat	ional or Trade Schools you have attended:
Name of School	Grade Completed or Degree
Name of School	Grade Completed or Degree
Name of School	Grade Completed or Degree



When can you report to work?					
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					
Are you under the age of 18 years?					
If Yes, under what other name did you work?					
Have you previously been employed by Tom Seely Furniture or Gat Creek? Yes No					
If Yes, please complete the following: Date employed					
Department Supervisor					
Reason for leaving					
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.)					
Can you perform the essential functions of the position for which you are applying, with or without accommodations? Yes No					
If accommodations are needed, please describe					



5. PLEASE READ CAREFULLY BEFORE SIGNING:

If hired, I will abide by the rules and policies of Gat Creek. 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 Gat Creek 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 Gat Creek 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 Gat Creek for their use in evaluating my suitability for employment. Further, I release the examining facility and Gat Creek 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.

Signature			Date

Congratulations! You've completed the application – now what!?

Here are some good options:

- On an smartphone or tablet? Find the open share icon and send the application via email to jobs@gatcreek.com.
- On a desktop or laptop? Save it to your files, attach a copy and email it to us at jobs@gatcreek.com.
- OR you can print the application and mail or hand deliver it to our shop: 5270 Valley Road in Berkeley Springs, WV 25411

We will respond to your application once it is received. Thank you for your interest in Gat Creek!

Equal Opportunity Employer • Drug-Free Workplace