



# APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, handicap, veteran status or any condition prescribed by state or local law.

Personal	Name: Last First Middle Initial			Date	
	Address: Number & Street		Apt #	Phone Number: Home	
	City		State	Zip Code	Phone Number: Mobile/other
	Position Desired			Email Address	
	Are you legally eligible for employment in the United States?			Social Security #	
	Have you been convicted of any crimes in the past ten years, which have not been annulled, expunged or sealed by a court? ____Yes ____No If Yes, describe in full.			Expected Compensation	
				Will you work overtime if asked?	
	Other special training or skills (languages, machine operation, etc.)			When will you be available to begin work?	
Colorado Driver's License # :		To expedite the processing of your application and ensure compliance with insurance requirements, a recent copy of your Motor Vehicle report is required. Sign here to authorize Door Specialties to obtain this information.			
Signature:_____				Date:_____	

Education	School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
	Business/Trade/Technical				____ Yes ____ No	
	High School				____ Yes ____ No	

## EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

1	Company Name	Phone
	Address	Employed (Month and Year) From _____ To _____
	Name of Supervisor	Compensation Start _____ Last _____
	Job Title and description of your work	Reason for leaving

2	Company Name	Phone
	Address	Employed (Month and Year) From _____ To _____
	Name of Supervisor	Compensation Start _____ Last _____
	Job Title and description of your work	Reason for leaving

We may contact the employers listed above unless you indicate those you do not want us to contact.	DO NOT CONTACT
	Employer Number(s) _____ Reason _____

Military	Did you serve in the U.S. Armed Forces? ____Yes ____No	If Yes, what Branch?
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Describe any training received relevant to the position for which you are applying.

SUBMIT