



Date of Application _____

Form G1

Name _____
last first middle

Application will only be considered
when all questions are answered.

HARDMAN SUPPLY COMPANY

EMPLOYMENT APPLICATION

We are pleased that you are seeking employment with Hardman Supply Company.
Applications are considered without regard to race, color, religion, sex, age, national origin, sexual orientation or any factors prohibited by local, state, or federal law. We are proud to be an Equal Opportunity/Affirmative Action Employer.

PERSONAL INFORMATION

Present Address (Street)		Home Phone	Cell Phone
Present Address (City, State, Zip)			How long at this address?
Previous Address (Street, City, State, Zip)			How long at this address?
Email Address	If Hired, I will provide proof of my legal right to work in the U.S. <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you worked for Hardman's before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when and under what name?	Position held?	
Are you presently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If employed, why do you wish to change?		
Have you filed an application here before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you been interviewed here before? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date available for work?	How much notice must you give?	Salary Expected: \$ _____ per hour or \$ _____ per month	Names of relatives working at Hardman's: Name _____ Relationship _____ Name _____ Relationship _____
How were you referred to Hardman's? <input type="checkbox"/> Current Hardman's Employee? (Name) _____ <input type="checkbox"/> Advertisement <input type="checkbox"/> School		<input type="checkbox"/> Agency <input type="checkbox"/> On my own <input type="checkbox"/> Other	Nature of work you are applying for? <input type="checkbox"/> Sales <input type="checkbox"/> Truck Driver <input type="checkbox"/> Managerial <input type="checkbox"/> Cashier <input type="checkbox"/> Clerical/Secretarial <input type="checkbox"/> Yard/Warehouse <input type="checkbox"/> Other (List) _____

Applying for: Full-time Part-time Temporary Summer Weekends

EMPLOYMENT HISTORY

If records are under a different name, please indicate for reference purposes. Starting with present or last employer, list all employment, including part-time or temporary.

Place of Employment		Dates (Mo. and Yr.)	Salary or Hourly Rate	Supervisor	
Name		From:	Beginning \$	Name	
Address		To:	Leaving \$	Phone	
Type of Business		Department		Position	
Title and duties at start		Title and duties at departure		May we contact for reference check? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name		From:	Beginning \$	Name	
Address		To:	Leaving \$	Phone	
Type of Business		Department		Position	
Title and duties at start		Title and duties at departure		May we contact for reference check? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name		From:	Beginning \$	Name	
Address		To:	Leaving \$	Phone	
Type of Business		Department		Position	
Title and duties at start		Title and duties at departure		May we contact for reference check? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name		From:	Beginning \$	Name	
Address		To:	Leaving \$	Phone	
Type of Business		Department		Position	
Title and duties at start		Title and duties at departure		May we contact for reference check? <input type="checkbox"/> Yes <input type="checkbox"/> No	

MILITARY EXPERIENCE

Use this section to list any periods of military service.

Branch	
Dates (Month and Year)	
Rank at separation	

Describe your duties:

Training schools attended	1.
	2.

Describe the training you received:

CRIMINAL CONVICTION

Have you, within the last seven years, been convicted of or pled guilty or nolo contendere (no contest) to a felony crime? (Convictions that have been expunged, sealed or legally eradicated need not be listed.) Yes No

If yes, state the nature of the crime(s), when and where convicted and the disposition of the case. A conviction will not necessarily disqualify you from employment. The nature of the offence, the surrounding circumstances and the relevance of the offence to the position(s) applied for may be considered.

ESSENTIAL JOB FUNCTIONS

Our retail operation has several different types of positions. Please respond whether you can meet the essential functions of the type of job for which you are applying with or without accommodations. You may apply for and be interviewed for more than one type of job.

Can you meet the attendance requirements of this job? Yes No

Store Sales Position

- | | |
|---|--|
| 1. Can you walk and stand on the job for extended periods of time - possibly up to 4 hours? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Can you consistently lift items that weigh up to 40 pounds? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Can you frequently bend, squat, reach, lift, carry, push and pull which will be necessary when stocking merchandise? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Can you work around products such as lawn chemicals, paints, solvents, pool chemicals, commercial cleaners and thinners? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Have you had any previous experience in selling or in dealing with people in sales-related positions? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. Can you work Saturdays, Sundays and evenings if it is a requirement of the position? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Warehouse/Outside Yard/Delivery Position

- | | |
|---|--|
| 1. Can you consistently lift items that weigh up to 100 pounds? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Have you ever operated motorized equipment such as forklifts? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Do you have a valid driver's license? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Can you frequently bend, squat, reach, lift, carry, push and pull which will be necessary when loading and unloading trucks or stocking merchandise? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Can you work Saturdays, Sundays and evenings if it is a requirement of the position? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. Can you work handling lawn chemicals, paints, solvents, pool chemicals, commercial cleaners and thinners? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Office/Clerical/Cashier Position

- | | |
|---|--|
| 1. Do you have experience working a cash register or handling cash transactions? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Have you ever been required to make cash bank deposits for a business? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Do you have experience in handling payroll, accounts payable, accounts receivable, or general ledger on a manual or computerized system? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Can you work Saturdays, Sundays and evenings if it is a requirement of the position? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Please add any comments or additional information you feel is applicable.

SKILLS

Please List

Typing Speed _____ wpm	Word Processing Equipment _____
Accounting/Bookkeeping _____	Computer Terminal _____
Calculator _____	Computer Languages _____
Forklift _____	Business Machines _____
Truck Driver _____	Printing Equipment _____
Other Skills/Equipment _____	

EDUCATION

If records are under a different name, please indicate for reference purposes.

Type of School	Name and Location	Major field of study	Did you graduate: Degree, Letter Grade or GPA
High School Last Attended			
College			
Grade School			
Other			

PROFESSIONAL REFERENCES

Names of references (Not former employers or relatives)	Address	Telephone

PLEASE READ

I hereby authorize Hardman Supply Company to make inquiries not limited to, but including current and/or previous employers, schools, credit agencies, etc. I understand that I have the right to request information about the nature and scope of any such investigation.

In accordance with company policy, I understand that if I am offered a position, I will be subject to pre-employment screening for the use of illegal drugs. I further authorize those physicians to release the results of any such tests to Hardman Supply Company, its agents and employees.

By signing this application, I affirm that all statements herein, (and my resume, if any) are true and correct. Any misrepresentation of facts will subject me to immediate termination.

I understand that in connection with my application for employment, Hardman Supply Company may require a background check, which will include (but is not limited to) a consumer report (credit check) and an investigative report (background check). I understand that I may be required to sign an additional background check authorization form to be considered for employment. I further understand that any job offer extended by Hardman Supply Company is contingent upon receipt of favorable consumer and investigative reports about me.

I understand that if I am employed, I may terminate the employment relationship at any time and Hardman Supply Company may terminate the employment relationship at any time, without notice or cause. I understand that practices and statements set out in policies, handbooks and other company literature may be changed at any time, without notice and that such practices and statements do not create an employment contract.

I HAVE READ THE ABOVE PARAGRAPHS, UNDERSTAND THEIR IMPORTANCE AND EFFECT UPON MY EMPLOYMENT AND ACCEPT SAME AS CONDITIONS OF MY EMPLOYMENT WITH THE COMPANY.

This application, when completed and signed, becomes the property of Hardman Supply Company.

Signature: (In ink) _____

Date: _____

Print Name: _____