EMPLOYMENT APPLICATION

Please complete the entire application.

1. Employer Information

Employer:	Fence Direct
Address:	9867 South Orange Blossom Trail
City/State/ZIP:	Orlando, Florida 32837
Telephone:	407-857-5770

It is the policy of Fence Direct to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

2. Applicant Information

Application Full Name:		
Home Address:		
City/State/ZIP:		
Number of years at this address:		
Daytime phone:	Evening phone:	
Mobile phone:		
Email address:		
3. Emergency Contact		
Who should be contacted if you are invo	lved in an emergency?	
Contact Name:		
Relationship to you:		
Address:		
City/State/ZIP:		
Daytime phone:		
4. Job Position Applied For:		

5.	Salary Desired: \$per	
6.	Are you at least 18 years old?Yes	No
7.	How will you get to work?	
8.	Are you willing to work any shift, including nights and weekends?Yes If no, please state any limitations:	No
9.	If applicable, are you available to work overtime? Yes No	
10.	If you are offered employment, when would you be available to begin work?	
11.	If hired, are you able to submit proof that you are legally eligible for employment in the United States? Yes	No
12.	Are you able to perform the essential functions of the job position you seek with or without reasonable accommodation?	No
	What reasonable accommodation, if any, would you request?	
13.	Have you ever been convicted of a felony or misdemeanor?	
	Yes, I was convicted of on(date)in(state)	(city),
	No	

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF EMPLOYMENT.

14. Applicant's Skills

List any skills that may be useful for the job you are seeking. Enter the number of years of experience and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

		Ability
		or
Skill	Years of Experience	Rating
		12345
		12345

15. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of his application.

Employer Name:	
Supervisor Name:	
Address:	
City/State/ZIP:	
Job Duties:	
Reason for Leaving:	
Dates of Employment (Month/Year):
Employer Name:	
Supervisor Name:	
Address:	
City/State/ZIP:	
Job Duties:	
Reason for Leaving:	
Dates of Employment (Month/Year):

Employer Name:
Supervisor Name:
Address:
City/State/ZIP:
Job Duties:
Reason for Leaving:
Dates of Employment (Month/Year):
16. Applicant's Education and Training
College/University Name and Address
Did you receive a degree? Yes No If yes, degree(s) received:
High School/GED Name and Address
Did you receive a degree? Yes No
Other Training (graduate, technical, vocational):
Please indicate any current professional licenses or certifications that you hold:
Awards, Honors, Special Achievements:
17. References
List any two non-relatives who would be willing to provide a reference for you.
Name:
Address:
City/State/ZIP:
Telephone:
Relationship:

Name:	
Address:	
City/State/ZIP:	
Telephone:	
Relationship:	

18. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any employer:

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Fence Direct to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as reference to fully and freely communicate information regarding my previous employment and education.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE

DATE