

# The Mentor Lumber and Supply Company

## EMPLOYMENT APPLICATION

Email completed application to:  
hr@mentorld.com, or mail to:  
HR Dept.  
7180 Center St. Mentor, OH 44060

The Mentor Lumber and Supply Company pledges itself to the policies of Equal Employment Opportunity for all employees and applicants seeking employment. Mentor Lumber does not discriminate in hiring or employment based on the basis of age, race, gender, sexual orientation, religion, national origin, disability, or other non-merit factor.

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME PHONE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ OTHER PHONE \_\_\_\_\_

LOCATION:  Mentor  Chardon EMAIL ADDRESS \_\_\_\_\_

POSITION(S) APPLIED FOR \_\_\_\_\_  FULL-TIME  PART-TIME  SEASONAL

REFERRED BY  Advertisement  Relative  Friend  Walk-in  Other \_\_\_\_\_

DATE AVAILABLE FOR WORK \_\_\_\_\_ SALARY REQUIREMENTS \_\_\_\_\_

HAVE YOU BEEN EMPLOYED BY MENTOR LUMBER AND SUPPLY BEFORE? Yes  No  IF YES, GIVE

**EXPERIENCE** *List present or most recent position first. In addition, list all previous positions, including any military service. (Attach additional sheet if needed)*

<u>Dates of Employment</u>	COMPANY NAME	YOUR TITLE	SALARY	IMMEDIATE SUPERVISOR
FROM:	COMPANY ADDRESS	TELEPHONE	LIST MAJOR DUTIES	
TO:	REASON FOR LEAVING			
<u>Dates of Employment</u>	COMPANY NAME	YOUR TITLE	SALARY	IMMEDIATE SUPERVISOR
FROM:	COMPANY ADDRESS	TELEPHONE	LIST MAJOR DUTIES	
TO:	REASON FOR LEAVING			
<u>Dates of Employment</u>	COMPANY NAME	YOUR TITLE	SALARY	IMMEDIATE SUPERVISOR
FROM:	COMPANY ADDRESS	TELEPHONE	LIST MAJOR DUTIES	
TO:	REASON FOR LEAVING			

**EDUCATION**

	Name and Location	Attendance (last year completed)	List diploma/degree received	Major subject
HIGH SCHOOL		1 2 3 4		
TECHNICAL, BUSINESS OR PROFESSIONAL TRAINING		1 2 3 4		
COLLEGE OR UNIVERSITY		1 2 3 4		
GRADUATE SCHOOL		1 2 3 4		

DO YOU HAVE COMPUTER SKILLS? \_\_\_\_\_ LIST SOFTWARE USED \_\_\_\_\_

LIST ANY OTHER SPECIAL JOB-RELATED SKILLS, APPRENTICESHIP, SPECIALIZED TRAINING OR ANY ADDITIONAL INFORMATION YOU WOULD LIKE US TO KNOW

**PROFESSIONAL REFERENCES** *Refer to people with whom you have worked for/with and are familiar with your work performance and experience.*

NAME	OCCUPATION / COMPANY	TELEPHONE / EMAIL
1.		
2.		
3.		

ARE YOU CURRENTLY EMPLOYED?  YES  NO

MAY WE REQUEST REFERENCES FROM YOUR CURRENT EMPLOYER?  YES  NO \_\_\_\_\_  
Applicant Initials

*I understand and expressly agree that The Mentor Lumber and Supply Company may make or employ an agency to make an investigation of my competence, character, general reputation and personal characteristics as it deems necessary. I expressly consent to such investigation and release all parties from all liability for any damage that may result from furnishing same to you.*

**DRIVING RECORD** *(to be completed by those applying for positions which include driving responsibilities)*

HAVE YOU HAD A VIOLATION FOR WHICH YOU WERE CITED?  YES  NO

IF YES, PLEASE LIST

DO YOU POSSESS A CURRENT/VALID CDL?  YES  NO WHICH CLASS? A B

*\*Mentor Lumber and Supply Companies are required by our liability insurance company to conduct a MVR (Motor Vehicle Registration) Report for each individual who is hired with driving responsibilities to ascertain insurability. In addition, a pre-employment query will be conducted via the FMCSA Commercial Driver's License Drug and Alcohol Clearinghouse for all CDL drivers.*

**CONVICTION RECORD**

HAVE YOU BEEN CONVICTED OF A FELONY?  YES  NO

IF YES, PLEASE EXPLAIN :

*\*Convictions will not necessarily disqualify an applicant for employment*

***I certify that all information on this form is true to the best of my knowledge and belief. I understand that I will be subject to dismissal at any time if I have made any misrepresentations herein or during the interview process. I give my consent to and understand that the satisfactory completion of a medical examination is a condition of employment with The Mentor Lumber and Supply Companies. I also agree to submit to a blood or urine test for the purpose of detecting the presence of alcohol or drugs, and understand that these results will be used to determine my eligibility for initial employment.***

*I hereby authorized Mentor Lumber to make any investigation of my personal history, academic/professional credentials, military service records, criminal, and driving records through any investigative bureaus of the company's choice*

*I understand that employment with The Mentor Lumber and Supply Companies is an employment at will; where, if employed by The Mentor Lumber and Supply Companies, I may sever my employment with the company for any or no reason, and the company may terminate my services on the same basis.*

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE