APPLICATION FOR EMPLOYMENT

Please type or print clearly and provide all requested information. Use "Refer to Resume" only to provide a detailed "Description of Duties, Responsibilities" on reverse side.

It is the policy of Lawrence Roll Up Doors ("Lawrence Doors") to provide equal opportunity in employment and advancement without regard to race (inclusive of traits historically associated with race, including, but not limited to, hair texture and protective hairstyles), religion (including religious dress and grooming practices), creed, color, age, sex, national origin, sexual orientation, gender, gender identity, gender expression, genetic information, physical or mental disability, marital status, military status, citizenship status or any other basis protected by federal, state or local law or ordinance. Should an applicant need a reasonable accommodation in the application process, he/she should contact a Lawrence Doors representative. Lawrence Doors will consider for employment all qualified applicants, including those with criminal histories, in a manner consistent with the requirements of applicable state and local laws.

Personal

Last Name Fi			First	First Name				M.I.	Appli	Application Date												
Address			City	City				State	Zip	Zip		Email Address										
Daytime	Phor	ne Numl	oer				Evening Phone Number								Ce	Cellular Phone Number						
()						(()								(
If offere	d em	oloymer	nt, ca	n you pi	ovide ve	rificatio	on of y	our leg	gal right t	o work	c in the	e U.S.?										
Yes		No																				
Gene	al I	nforn	nati	on																		
Position						F	Full-tim	e or p	art-time?						Date	Availab	le					
How were you referred to us?				N	Will you work overtime?							Will y	Will you work weekends?									
							Yes		No						Ye	s	No					
Are you	over	18 year	s of a	age?			100		110	1	1				10	<u> </u>	110					
Yes		No																				
		oliod to	work	otlow	ence Do	ore in t	the ner	×+2						Yes		No						
			WUIK	al Lawi		015 111	ine pas	51 ?							1							
lf yes, s																						
Do you	have	any frie	nds d	or relativ	es emplo	oyed by	y Lawr	ence l	Doors?					Yes		No						
If yes, s	tate r	ame ar	nd job):																		
Are you	able	to perfo	orm th	ne esser	ntial dutie	es of th	ne posit	tion fo	r which y	ou are	apply	/ing eitl	ner wit	h or wi	thout i	reasona	ble acc	ommod	atior	ns? Ye	s	No
If applic	able,	please	indica	ate wha	type(s)	of reas	sonable	e acco	mmodati	ons ar	e nee	ded.										

Education	Name of School and Location (City & State)	Did you Graduate? Yes or No	Degree and Major	Dates of Attendance	Grade G.P.A.
High School					
College/University					
Graduate School					
Tech/Trade/ Military/Other					
Tech/Trade/ Military/Other					

Job Related Skills/Licenses (Computer, Typing [WPM], Driving, etc.)

Other Course(s) or Training Related to Desired Work

Professional Registrations/Certifications

Other Job-Related Activities (e.g., Professional Memberships) that may prove beneficial to your work.

Employment History								
List present employer first. Include periods of time for the past ten (10) years whether employed or unemployed, including volunteer work and active military service (use additional forms if necessary). Use "Refer to Resume" only to provide detail in "Description of Duties and Responsibilities.								
1 From (Month/Year)		To (Month/Year)	Total Months/Years					
Full name of Employer:								
Main Office Address:								
City:	State:		Zip:					
Reason for leaving:			Name of Your Superv	visor:				
Starting Position:			Your Supervisor's Ph		Ext.			
Last Position:								
Description of Duties, Responsibilities:								
Description of Duties, Responsibilities.								
2 From (Month/Year)		To (Month/Year)	Total Months/Years					
Full name of Employer:		<u></u>						
Main Office Address:								
City:	State:		Zip:					
Reason for leaving:	olulo.		Name of Your Supervisor:					
Starting Position:			Your Supervisor's Phone Number: Ext.					
Last Position:								
Description of Duties, Responsibilities:			1					
3 From (Month/Year)		To (Month/Year)	Total Years/Months					
Full name of Employer:			-					
Main Office Address:								
City:	State:		Zip:					
Reason for leaving:	1	-	Name of Your Supervisor:					
Starting Position:			Your Supervisor's Phone Number: Ext.					
Last Position:								
Description of Duties, Responsibilities:			1					

4	From (Month/Year)		To (Month/Year)	Total Years/Months						
Full na	Full name of Employer:									
Main C	office Address:									
City:		State		Zip:						
Reaso	n for leaving:			Name of Your Supervisor:						
Startin	g Position:			Your Supervisor's Pho	Your Supervisor's Phone Number: Ext.					
Last Po										
	ption of Duties, Responsibilities:									
Desch	Such of Duties, Responsibilities.									
May w	e contact your current employer?	Ye	es No	May we contact all of you	Ir past employers? Yes	No				
				If not, which one(s)? Ple	ase indicate:					
-	Have you ever been discharged from any position for misconduct or unsatisfactory services? Yes No If yes, please explain.									
Busi	Business or Job-Related References									
	name three business or job-related	l refere			Occupation					
Please <u>Name</u>	name three business or job-related	l refere	nces (in addition to supervisors r Address & Telephone		Occupation					
	name three business or job-related	l refere			<u>Occupation</u>					
	name three business or job-related	l refere			<u>Occupation</u>					
<u>Name</u>	name three business or job-related	I refere			<u>Occupation</u>					
Name Pers Please			Address & Telephone	Number						
<u>Name</u> Pers	onal References		Address & Telephone	Number	<u>Occupation</u>					
Name Pers Please	onal References		Address & Telephone	Number						
Name Pers Please	onal References		Address & Telephone	Number						
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Name Pers Please Name	onal References name three personal references (n	ot form	Address & Telephone	Number						
Name Pers Please Name	onal References name three personal references (n	ot form	Address & Telephone	Number						
Name Pers Please Name	onal References name three personal references (n re you interested in working for Law	ot form	Address & Telephone	Number	Occupation					
Name Pers Please Name Why a	onal References name three personal references (n	ot form	Address & Telephone	Number	Occupation					
Name Pers Please Name Why a Do you	onal References name three personal references (n re you interested in working for Law na Record – Fill out if po	ot form rence l ositic	Address & Telephone	Number	Occupation					

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Initial	1.	I understand that after receiving a conditional offer of employment, Lawrence Doors may condition the offer of employment on satisfactory background checks, including but not limited to, a criminal background check. I agree to sign a consent form allowing Lawrence Doors to conduct such background checks.
 Initial	2.	I understand that after receiving a conditional offer of employment, Lawrence Doors may condition the offer of employment on satisfactory completion of a medical examination and/or a drug and alcohol screen. I agree to sign a consent form and a release of test results authorization form, and to submit to a medical examination and/or drug and alcohol screen should Lawrence Doors condition my offer of employment upon successful completion of such an examination or screening.
Initial	3.	I understand that any offer of employment will be predicated upon the truthfulness of the written and verbal statements contained within this application and during the pre-employment process. I authorize Lawrence Doors and/or any of its agents to verify the accuracy and completeness of any and all of the information that I have provided. I understand that should Lawrence Doors find that any statement I have made is not truthful and/or if I have omitted any information, any job offer extended to me will be withdrawn and, if employed, I may be subject to immediate termination.
Initial	4.	I authorize Lawrence Doors to make any investigation allowed by law that it deems necessary for employment consideration and promotion within the Company.
Initial	5.	I authorize my former employers and educational institutions to provide Lawrence Doors with any information that they have about me and I absolve them from any damages in providing such information.
Initial	6.	I understand that this employment application and any offer of employment are not to be construed as a contract of employment, express or implied and/or a guarantee of employment for a specific time. I further understand that my employment with Lawrence Doors is terminable at will for any reason either by myself or Lawrence Doors at any time, with or without cause and with or without notice. This at-will aspect of my employment cannot be changed, waived, or modified except by an express provision in an individual written employment contract signed by me and an Owner of Lawrence Doors and only if such contract explicitly modifies the at-will nature of employment at Lawrence Doors.
Initial	7.	Except as required in the performance of my duties, I understand and agree that I will not at any time during or after my employment use, disclose, publicize, publish or disseminate any confidential or proprietary information or trade secrets about and/or relating to Lawrence Doors or its products, services, policies, practices, customers and employees. I agree to deliver to Lawrence Doors any and all copies of confidential, proprietary and trade secret information or other Company property upon termination of the employment relationship or at any time at Lawrence Doors' request.
 Initial	8.	I acknowledge that I have read all of the above statements and that I understand them. I certify that I have completed this application. I declare under penalty of perjury that the information and statements contained herein (or any resume or other documents submitted for employment with Lawrence Doors) are true and complete.
Signature		Date