



**Northeast Building Supply and Home Center, LLC requires a pre-employment drug test. Northeast Building Supply and Home Center, LLC does not discriminate on the basis of race, color, religion, gender, or national origin, age, or disability**

**EMPLOYMENT RECORDS**

List jobs in reverse order starting with your present job. List your entire work history including volunteer, part-time, temporary, self-employment, and military jobs. List promotions as a separate job. This section must be accurate and complete. If more space is needed, attach additional sheets in the same format, including your name, social security number, and signature.

1. Employer:			Address:		
From Mo/Yr.	To Mo/Yr.	Hrs Per Week:	Your Title:		
Last Salary: \$	Supervisor:	May We Contact? Yes No		Phone:	
Name on Employment Records if Different From Present Name:					
Reason for Leaving:					
Duties:					

2. Employer:			Address:		
From Mo/Yr.	To Mo/Yr.	Hrs Per Week:	Your Title:		
Last Salary: \$	Supervisor:	May We Contact? Yes No		Phone:	
Name on Employment Records if Different From Present Name:					
Reason for Leaving:					
Duties:					

3. Employer:			Address:		
From Mo/Yr.	To Mo/Yr.	Hrs Per Week:	Your Title:		
Last Salary: \$	Supervisor:	May We Contact? Yes No		Phone:	
Name on Employment Records if Different From Present Name:					
Reason for Leaving:					
Duties:					

**REFERENCES**

Give names and addresses of three people, not relatives or former employers, who have known you for at least one year

	Name	Address	Phone Number
1			
2			
3			

NEITHER THIS APPLICATION NOR AN INTERVIEW CONSTITUTES A CONTRACT OF EMPLOYMENT AND, IF HIRED, ALL EMPLOYEES OF NORTHEAST BUILDING SUPPLY AND HOME CENTER, LLC ARE EMPLOYEES-AT-WILL WHO MAY QUIT AT ANY TIME FOR ANY OR NO REASON AND MAY BE TERMINATED AT ANY TIME FOR ANY OR NO REASON.

### **CERTIFICATION OF APPLICANT**

I affirm, agree, and/or understand that all statements on this form are true and accurate and any misrepresentation or omission of facts may result in my disqualification for consideration for the position applied for or my discharge from the position should I already be employed. I understand you may inquire into my background and conduct a fingerprint check. If I have requested herein that my employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from such employer prior to beginning work.

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(Signature)

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(Name Printed)