



# APPLICATION FOR EMPLOYMENT

As an Equal Opportunity Employer, we base employment decisions on job-related information. All legal requirements pertinent to fair employment practices are complied with by our Company.

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

How Did You Learn About Us?: \_\_\_\_\_

Are you a citizen of the United States?  YES  NO If no, are you authorized to work in the U.S.?  YES  NO  
*(Proof of U.S. citizenship or immigration status will be required upon employment.)*

Have you ever worked for Riemer Floors?  YES  NO If yes, when? \_\_\_\_\_

Have you applied here before?  YES  NO If yes, when? \_\_\_\_\_

Are you 18 years of age or older?  YES  NO Are you on layoff, subject to recall?  YES  NO

Will you work overtime as required?  YES  NO Will you travel if job requires it?  YES  NO

Have you been convicted of a felony within the last seven years?  YES  NO  
*(Conviction will not necessarily disqualify an applicant from employment.)*

If yes, explain: \_\_\_\_\_

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  YES  NO Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  YES  NO Degree: \_\_\_\_\_



Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

**Skills & Qualifications**

Special Training or Instruction: \_\_\_\_\_

Special Skills or Equipment: \_\_\_\_\_

Subjects of Special Study or Research Work: \_\_\_\_\_

Additional information you think would be helpful? \_\_\_\_\_

**References**

*Please list three professional references who are not related to you, and who are not previous supervisors.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO





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Company: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

Do you have a Reserve or National Guard obligation? YES  NO

If so, please explain: \_\_\_\_\_

**Driver's License Info**

License #: \_\_\_\_\_ Expiration: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Eyes: \_\_\_\_\_ Type: \_\_\_\_\_

Restrictions: \_\_\_\_\_

Number in the Lower Right Hand Corner of License: \_\_\_\_\_



**Disclaimer & Signature**

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at any employment decision. I understand that any false answers or statements or misleading omissions made by me on this application, in connection with the investigation of this application, can be sufficient grounds for my rejection as a candidate for employment or immediate discharge.

I authorize all my current or previous employers, education institutions, and other references listed above to furnish to the employer and its agents any information, whether or not it is in their records, regarding any employment, educational record, personal character, or work or personal habits. I release all such persons or organizations from any and all liabilities or damages whatsoever from furnishing any of the above information.

I understand that Riemer Floors, Inc. requires pre-employment drug testing. I further understand that failure to consent to this urine drug screen will be considered withdrawal of my application for employment. I also understand that if the test discloses the presence of any one or more of the tested drugs, I will be denied employment. I authorize the laboratory utilized by Riemer Floor's, Inc. physician(s) to release the results of this drug screen to the authorized representative of the Company and understand that the results and findings of the drug screen will not be released by the Company to any person or agency unless compelled to do so by judicial process in the case of law enforcement officials.

I agree and understand that any employment offer is conditional until such time as the results of my reference checks and medical examination, if any, are known.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with our without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

Under Michigan law, handicapped employees and applicants may request an accommodation of their handicap by notifying the Company in writing of the need for accommodation within 182 days of the date the handicapped individual knows or should know that an accommodation is needed. Failure to properly notify the Company will preclude any claim that the employer failed to accommodate the handicapped individual.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DO NOT WRITE BELOW**

Arrange Interview?      YES      NO  
                                         

Remarks: \_\_\_\_\_

Interviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Employed?      YES      NO      Date of  
                                     Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_ Department: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_



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## INVESTIGATIVE REPORT DISCLOSURE AND AUTHORIZATION

By this document, Riemer Floors Inc. hereby discloses to you that an investigative consumer report, including an investigative consumer report containing information as to your character, general reputation, personal characteristics, driving record and mode of living, may be obtained for employment purposes as part of the pre-employment background investigation, and at any time during your employment. Should an investigative consumer report be requested, you would have the right to demand a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act. Further, by signing and acknowledging receipt of this disclosure, you hereby expressly authorize Riemer Floors Inc. and/or Kerby, Bailey and Associates and/or any other like company, acting as an agent of such, to obtain a consumer investigative report in accordance with the Fair Credit Reporting Act.

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Applicant Signature

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Driver's License Number

RIEMER FLOORS INC.

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By

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Date