



Weather Shield® Employment Application

Premium Windows & Doors

Date: _____

Name: _____
Last First Middle

Address: _____

Home Phone: _____ Cell: _____ Email: _____

LIST ANY OTHER NAME(S) YOU USED DURING EDUCATION OR EMPLOYMENT:

AT WHICH LOCATION(S) ARE YOU AVAILABLE TO WORK:

Ladysmith, WI Medford, WI Park Falls, WI Other: _____

WHICH POSITION ARE YOU APPLYING FOR:

TYPE OF POSITION APPLYING FOR:

Full Time Part Time Other _____ 1st Shift 2nd Shift 3rd Shift

HAVE YOU BEEN EMPLOYED WITH ANY WEATHER SHIELD LOCATION BEFORE?

No Yes Division: _____ Dates: _____

Department(s) _____ Supervisor(s) Name: _____

DATE AVAILABLE TO BEGIN WORK: _____ ANNUAL SALARY REQUIREMENT: _____

HOW WERE YOU REFERRED TO WEATHER SHIELD? (Please check all that apply.)

Newspaper Job Center Friend/Relative Internet (Please List Site): _____

Employee of the Schield Family Brands (Please Name) _____

ARE YOU OF LEGAL AGE TO WORK? (Age 18 in production area) No Yes

ARE YOU PRESENTLY AUTHORIZED TO WORK IN THE U.S. ON A FULL-TIME BASIS?

No Yes (Employment is subject to verification of authorization to work in the U.S.)

ARE YOU UNDER ANY OBLIGATION TO A PREVIOUS EMPLOYER THROUGH A NON-COMPETE, SECRECY, AND/OR INVENTION AGREEMENT, OR OTHERWISE RESTRICTING YOUR ACCEPTANCE OF EMPLOYMENT WITH A COMPETITIVE FIRM?

No Yes

Employment History (Please list in chronological order)

PLEASE BE AWARE THAT ANY FALSE STATEMENTS, OMISSIONS OR MISLEADING STATEMENTS PERTAINING TO WORK HISTORY SHALL BE SUFFICIENT CAUSE FOR DENIAL OF EMPLOYMENT OR TERMINATION.

MOST RECENT EMPLOYER

Company Name: _____

Address _____ Phone _____

Full Time Part Time Shift: _____ Average Hours/Week: _____

Dates Employed: From _____ To _____ Last Day Worked _____

Type of Work/Job Title: _____

Last Salary: _____

Name of Supervisor/Extension: _____

Reason for Leaving
(Please be detailed):

NEXT EMPLOYER

Company Name: _____

Address _____ Phone _____

Full Time Part Time Shift: _____ Average Hours/Week: _____

Dates Employed: From _____ To _____ Last Day Worked _____

Type of Work/Job Title: _____

Last Salary: _____

Name of Supervisor/Extension: _____

Reason for Leaving
(Please be detailed):

NEXT EMPLOYER

Company Name: _____

Address _____ Phone _____

Full Time Part Time Shift: _____ Average Hours/Week: _____

Dates Employed: From _____ To _____ Last Day Worked _____

Type of Work/Job Title: _____

Last Salary: _____

Name of Supervisor/Extension: _____

Reason for Leaving
(Please be detailed):



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Education/Other

PLEASE LIST ANY SKILLS ATTAINED THROUGH WORK OR EDUCATION YOU FEEL ARE RELEVANT TO THE POSITION:

ACADEMIC TRAINING

High School – Graduate: No Yes Equivalency

College/Technical School – Graduate: No Yes

List College/Technical Degree(s) Acquired (include school degree was attained from):

List Colleges/Technical Schools Attended (may not have graduated):

MILITARY SERVICE/DATES:

Skills Acquired: _____

LIST CAREER CERTIFICATIONS:

OTHER SKILLS/INFORMATION:

LIST COMPUTER PROGRAMS YOU HAVE EXPERIENCE USING (check all that apply)

- MS Windows MS Word AutoCAD Oracle Enterprise One/JD Edwards
 MS Excel MS PowerPoint AS400 SolidWorks Timetrak Direct Route
 Additional programs you have experience using (Not Listed Above):

HAVE YOU EVER BEEN CONVICTED OF A FELONY?

No Yes

Note: Convictions or pending charges will not automatically disqualify an applicant from consideration for employment.

References

Please list professional references to contact (not relatives) who are acquainted with your work history

REFERENCE:

Name: _____
Occupation/Relationship: _____
Company City and State: _____
Phone: _____ Email: _____

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Name: _____
Occupation/Relationship: _____
Company City and State: _____
Phone: _____ Email: _____

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Name: _____
Occupation/Relationship: _____
Company City and State: _____
Phone: _____ Email: _____

Company policy prohibits direct supervision of a relative or significant relationship.

AGREEMENT TO INVESTIGATE AND RELEASE:

READ CAREFULLY AND SIGN BELOW FOR CONSIDERATION.

I affirm that the information contained in this application is true, correct, and complete. I understand that any false statements or omissions concerning requested information on this application shall be sufficient cause for denial of employment or summary dismissal. I also understand that my employment at Weather Shield (The Company) is contingent upon satisfactory investigation of my work record and references.

I release from any and all liability all representatives of The Company, for their acts performed in good faith and without malice in connection with evaluating my application, credentials, and qualifications. I further authorize any party having information bearing upon my qualifications for employment to release such information to The Company (unless otherwise stated). I also release from any and all liability all individuals and organizations who provide information to The Company in good faith and without malice concerning my employment competence, ethics, character, and other qualifications, including otherwise privileged or confidential information.

I understand and acknowledge that in the event I am employed by The Company my employment is not for any specific length of time, but, rather is of an "at will" nature, which means that I may resign at any time and my employer may terminate my employment at any time with or without cause. I understand that no present or future employee handbook, policy manual, work rules or publication constitutes an employment agreement or contract. 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 acknowledged in writing signed by both myself and an authorized executive of The Company as applicable.

The Company Drug Testing Policy requires applicants to submit to drug/alcohol screening, and employment is contingent upon successfully passing a test.

I have read and understand the above agreement.



eSignature (enter your full legal name here)

Date



Weather Shield®
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*Weather Shield is an Equal Opportunity Employer
Weather Shield is an "At Will" Employer*