



Fax completed application to 301-729-1217 or deliver to 12816 Winchester Road SW, Cumberland, MD.

APPLICANT INFORMATION

Date	_____	Soc. Sec. #	_____
Name	_____	Date of Birth	_____
Address	_____	Driver's License #	_____
	_____	Home Phone	_____
City, State, Zip	_____	Cell Phone	_____

EMPLOYMENT RECORD

Please list present or most recent employer first

Employer	_____	Type of Business	_____
Address	_____	Phone #	_____
	_____	Supervisor	_____
City, State, Zip	_____	Hire Date	_____
	_____	End Date	_____
Reason for Leaving	_____	Rate of Pay	_____

Employer	_____	Type of Business	_____
Address	_____	Phone #	_____
	_____	Supervisor	_____
City, State, Zip	_____	Hire Date	_____
	_____	End Date	_____
Reason for Leaving	_____	Rate of Pay	_____

Employer	_____	Type of Business	_____
Address	_____	Phone #	_____
	_____	Supervisor	_____
City, State, Zip	_____	Hire Date	_____
	_____	End Date	_____
Reason for Leaving	_____	Rate of Pay	_____

Have you ever been convicted of a crime other than a traffic violation? Yes No



REFERENCES

Please list 3

Name _____	Phone _____	Relationship _____
Name _____	Phone _____	Relationship _____
Name _____	Phone _____	Relationship _____

EXPERIENCE & TRAINING

Check your present skill level in the following trades

Trade	None	Limited	Average	Good	Excellent	Yrs. Exp.
Masonry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Framing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Roofing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Trim Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Drywall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Painting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Plumbing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Concrete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Can you complete the following tasks?

- | | | |
|---|------------------------------|-----------------------------|
| 1. All aspects of wood framing | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Install roof shingles & ridge vent | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Install soffit, fascia, and vinyl siding | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Finish drywall and spot repairs | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Paining and spot touch-up to blend | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Install electrical outlets, switches, lights, breakers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Exchange plumbing fixtures | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Finish concrete and point-up | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. Install vanities, kitchens, and counters | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. Install window trim, doors, and hardware | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. Stain and finish wood trim | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12. Operate an aluminum brake | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Do you have the following?

- | | | |
|-------------------------------|------------------------------|-----------------------------|
| Own transportation | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Own hand tools and power saws | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

List Job Related Training and Experience

I certify that the information provided in this application is true and correct to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in immediate dismissal.

 Applicant Signature

 Date

