



Dear Applicant:

We are pleased that you have chosen to submit an employment application for our company's consideration. Schiller Architectural is an equal opportunity employer and will consider applicants for all positions without regard to race, age, color, religion, marital status, nation origin, disability, veteran status or any other legally protected status. No applicant will be rejected as a result of any impairment, which, with reasonable accommodation, does not prevent performance of the work. Schiller Architectural will not tolerate sexual harassment or harassment on the basis of any protected class status in the workplace.

It is important for you to understand that in the event a position with our firm is offered to you, the following items **may** be required prior to your actual employment;

Applicant's Certification – Please read this carefully before signing the certification

1. I understand that, if selected, I will be required to provide proof of my identity and legal right to work in the United States prior to actual employment at Schiller Architectural.
Initial as accepted: _____
2. I understand that, if selected, a current background check will be performed. The results of which may affect the continuance of your hiring process. Generally the past two years will be reviewed. **This is an absolute requirement prior to employment.**
Initial as accepted: _____
3. Have a drug/blood alcohol test. This testing would be performed at a location and time as defined by the company, and would be at your expense. In the event the test results show no presence of controlled substances or alcohol, the company will reimburse the amount charged to you for the test.
Initial as accepted: _____
4. You certify that the information provided on the employment application, and/or supporting documents, are true and understand that any false statements or willful omission of facts are cause for refusal of employment or, if employed, immediate dismissal without recourse or judgment against Schiller Architectural. I hereby authorize all previous employers and supervisors, including all persons with and for whom I have worked, to give Schiller Architectural's representative's any and all information regarding me and my previous employment. I release Schiller Architectural and all previous employers and supervisors from liability for any damages that may result from furnishing information to Schiller Architectural.
Initial as accepted: _____
5. If employed, I understand that my employment is for no definite period of time and, if terminated, this company is only liable for wages earned as of the date of termination. I understand that all employees of Schiller Architectural, with respect to length of employment, are considered to be "at will." This means that I may terminate my employment with Schiller Architectural at any time, without notice, without liability, for any extended period. Similarly, Schiller Architectural may terminate my employment with Schiller Architectural at any time without notice, without liability, for any extended period. There is no guaranteed length of employment for any employee. Similarly, any representation by any agent or employee of Schiller Architectural to the contrary is not authorized or binding upon Schiller Architectural unless in writing and signed by the President of Schiller Architectural.
Initial as accepted: _____
6. In consideration of my employment, I agree to adhere to all existing and future instructions, rules and policies of Schiller Architectural. I also understand that Schiller Architectural reserves the right to change wages, hours and working conditions as deemed necessary and that no representative of Schiller Architectural has any authority to enter into any agreement for employment for any specified period or to make any agreement contrary to the foregoing.
Initial as accepted: _____
7. I understand that neither this document nor any offer of employment from Schiller Architectural constitutes an employment contract unless a specific document to that effect is executed by Schiller Architectural and employee in writing.
Initial as accepted: _____

Upon a position being offered, you agree to the following:

1. No individual working in the company, whether through an employment agency or on Schiller Architectural's payroll is to discuss the terms of their compensation or employment with the company. This is a strict policy and violation of it is cause for immediate termination of employment.

Initial as accepted: _____

2. The employees and workers in the company operate under the procedures, policies and rules of conduct as defined in the company's Employee Manual. Your acceptance of a position with our company is also considered your acceptance of the company's guidelines stated therein and as may from time-to-time be amended. A master copy of this Employee Manual can be found in each of our company locations. It is your responsibility to read and understand this manual within the first five days of your presence at Schiller Architectural. Any supervisor can explain any items of question.

Initial as accepted: _____

3. Some positions at Schiller Hardware require the employee to enter into a Confidentiality/Non-Competition Agreement with the company. If a position requiring such an agreement is offered now, or in the future, you agree to accept the terms and conditions of such agreement as a requirement of your employment.

Initial as accepted: _____

4. Company Asset Responsibility Agreement: I do hereby agree to assume full responsibility for any company supplied asset in my possession, or extended to me as being in my care, custody and control. I understand that my responsibility includes reimbursement to Schiller Architectural Inc. for the full book value of any items that are lost, misplaced, damaged or stolen through neglect or misuse. If company assets are stolen from my possession, I understand that I must immediately file a police report and submit a copy to Schiller Hardware, Inc. Failure to do so will result in reimbursement from me to Schiller Architectural, Inc., for the full book value of the stolen assets.

Initial as accepted: _____

I have read and reviewed the above certification statements and other information provided on the application.

Signed and accepted this date: ____/____/____

By: _____
Signature

Please print name here: _____



Employment Application

Position you are seeking (you must fill out one application for each position you are applying for)

How did you learn about this position?

Advertisement (specify source) _____ Friend Employment Dept Walk-In Website Other: _____

| | | | |
|---------|-------|---------|--------|
| Name | Last | First | Middle |
| Address | | Phone # | Email |
| City | State | Zip | |

Have you ever filed an application with Schiller Architectural before? Yes No
 If yes, please give date: _____

Do any of your friends or relatives, other than a spouse work here? Yes No
 If yes, please give name, relationship and position: _____

Have you ever been employed with Schiller Hardware before? Yes No
 If yes, please give date and position: _____

Are you at least 18 years of age? Yes No
 If you are under 18 years of age, can you provide proof of your eligibility to work? Yes No

Are you a US citizen? Yes No
 If not a US citizen, do you have proof of your legal right to accept employment? Yes No

Are you currently employed? Yes No
 If yes, may we contact your current employer? Yes No

Are you currently on lay-off status and subject to recall? Yes No

Will you travel if a job requires it? Yes No

Will you work overtime? Yes No

Have you ever been convicted of a crime? Yes No
 If yes, please give date and reason for conviction: _____
 (All positions at Schiller Architectural are subject to a Criminal Background Check.)

Are you capable of performing, with or without reasonable accommodation, the essential duties of the job for which you are applying? (Do not answer unless you have read the job description.) Yes No

Date available for work: _____

What is your desired salary range? _____

Please check your availability to work:

Regular Full-Time Regular Part-Time at _____ hours/week Temp/Seasonal Full-Time Temp/Seasonal Part-Time at _____ hours/week

Education & Training

| School | Name, City & State of School | Course of Study | # years | Diploma/Degree | |
|----------------------|------------------------------|-----------------|---------|----------------|----|
| High School | | | | Yes | No |
| Undergraduate School | | | | Yes | No |
| Graduate School | | | | Yes | No |
| Other (Specify) | | | | Yes | No |

Please state any additional information and skills you feel may be helpful to us in considering your application: _____

Work Experience

| | | |
|--------------------------|----------------------------------|--------------------------------------------------------------------------|
| Employer: | Dates Employed | Work performed/Responsibilities: |
| | From: To: | |
| Address: | Hourly/Salary Rate | |
| | Start: End: | |
| Supervisor & Telephone # | | May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Job Title | | Reason for leaving: |
| Employer: | Dates Employed | Work performed/Responsibilities: |
| | From: To: | |
| Address: | Hourly/Salary Rate | |
| | Start: End: | |
| Supervisor & Telephone # | | May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Job Title | | Reason for leaving: |
| Employer: | Dates Employed | Work performed/Responsibilities: |
| | From: To: | |
| Address: | Hourly/Salary Rate | |
| | Start: End: | |
| Supervisor & Telephone # | | May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Job Title | | Reason for leaving: |
| Employer: | Dates Employed | Work performed/Responsibilities: |
| | From: To: | |
| Address: | Hourly/Salary Rate | |
| | Start: End: | |
| Supervisor & Telephone # | | May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Job Title | | Reason for leaving: |

Professional/Business References – Please do not include family members.

| Name | Phone Number | Occupation |
|------|--------------|------------|
| 1. | | |
| 2. | | |
| 3. | | |

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 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.

The applicant understands that neither this document nor any other offer of employment from the employer constitute an employment contract unless a specific document to that affect is executed by the employer and employee in writing.

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 of Applicant

Date