

MAIN OFFICE

2 Hammond Drive PO Box 500 Belgrade, Maine 04917 Tel. (207) 495-3303 Fax (207) 495-2304 www.hammondlumber.com

☐ AUBURN 282 POLAND ROAD AUBURN, ME 04210 207-784-4009

☐ BANGOR 1087 HAMMOND STREET BANGOR, ME 04401 207-945-9416

□ BELGRADE

2 Hammond Drive Belgrade, ME 04917 207-495-3303

■ BOOTHBAY HARBOR

276 Townsend Avenue Boothbay Harbor, ME 04538 207-633-4474

□ BRUNSWICK

20 Spring Street Brunswick, ME 04011 207-729-9924

□ DAMARISCOTTA

511 Main Street Damariscotta, ME 04543 207-563-1200

☐ FAIRFIELD

5 Summit Street Fairfield, ME 04937 207-453-7322

☐ FARMINGTON

389 Farmington Falls Road Farmington, ME 04938 207-778-3518

☐ GREENVILLE

17 Minden Street Greenville, ME 04441 207-695-4583

□ PEMAQUID

2089 Bristol road Pemaquid, ME 04558 207-677-2652

□ PORTLAND

300 Riverside Street Portland, ME 04103 207-771-8880

□ SKOWHEGAN

34 Pennell Street Skowhegan, ME 04976 207-474-8122

□ WILTON

946 US Route 2 East Wilton, ME 04294 207-778-6969

Fill out this application only if you are applying for any non-driver position.

Please indicate which locations you are applying for by checking the appropriate boxes.

General Application

Dear Applicant,

This application should be filled out completely and legibly. Hammond Lumber Company does not accept applications that indicate "see resume" in lieu of completing application information. Please check all information for accuracy, including previous employers' phone numbers, then sign and date the back of the application.

Sincerely,

Robert Thing

Director of Operations

Lumber Company

Form # RJA400

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital, veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For			·	Date of App	lication
How Did You Learn About Us?					
☐ Advertisement	■ Radio	■ Relative	Refe	rred by:	
☐ Employment Agency	☐ Newspaper	☐ Friend	Othe	r	
Last Name	First N	Name		Middle Name	
Address Number	Street	City		State	Zip Code
Telephone Number(s)				Social Security N	Number (optional)
Best time to contact you at hom	ne is:				AM PM
If you are under 18 years of age	e, can you provide proof o	f your eligibility to work	k?		☐ Yes No ☐
Have you ever filed an applicat	ion with us before?				☐ Yes No ☐
If Yes, give	date				
Have you ever been employed with us before?					☐ Yes No ☐
If Yes, give	date				
Are you currently employed?					☐ Yes No ☐
May we contact your present er	mployer?				☐ Yes No ☐
Are you prevented from lawfull Proof of citi	ly becoming employed in zenship or immigration st	•		~	☐ Yes No ☐
Date available for work	_// Wh	at is your desired salary	range?		
. ,	Full Time		_	_	
	~	dicate Morning dicate dates available		_	/
Are you currently on "lay-off":					
Can you travel if a job requires	it?				☐ Yes No ☐

EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or any other protected status.

1.	Employer		Dates Ei From	mployed To	Work Performed	
	Address		Trom	10		
	Telephone Number(s)		Hourly Ra			
	Job Title	Supervisor	Starting	Final		
	Reason for Leaving	<u> </u>				
2.	Employer		Dates Ei		Work Performed	
	Address		From	То		
	Telephone Number(s)		Hourly Ra	te / Salary Final		
	Job Title	Supervisor	Starting	Final		
	Reason for Leaving	I				
3.	Employer		Dates Er From	mployed To	Work Performed	
	Address					
	Telephone Number(s)		Hourly Ra Starting	te / Salary Final		
	Job Title	Supervisor				
	Reason for Leaving					
4.	Employer		Dates Er From	mployed To	Work Performed	
	Address					
	Telephone Number(s)		Hourly Ra Starting	te / Salary Final		
	Job Title	Supervisor				
	Reason for Leaving					
	Explain any gaps in you	r employment				

ADDITIONAL INFORMATION

	□ Yes	□ No	
If yes, please explain:			
Please list all names you l	have used in the last 7 year	s if different than the name you are using now	7.
lease list all hames you i	mave used in the last / year	s if different than the name you are using now	•

EDUCATION

	Name & Address of School	Course of Study	Number of Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				
Describe any specialized ing. You may exclude a	d training, apprenticeship, skills nything which would reveal ger	s and extracurricular activities wander, race, religion, national ori	which you feel are relevant to the gin, age, ancestry, disability or a	e job for which you are applying other protected status.
Describe any job-related	1 training received in the United	States Military which you feel	is relevant to the job for which	you are applying.

ADDITIONAL INFORMATION

Su	Other Qualifications Summarize special skills and qualifications acquired from employment or other experience which you believe are relevant to the job for which you are applying.						
SP	ECL	ALIZED SKILLS (Check Ski	ills /	Equipment Operated)			
		Terminal		Spreadsheet	Mach	inery (List)	Other (List)
		Personal Computer / MAC		Word Processing			
		Typewriter		Telephone System Multi-Line			
_		_Words Per Minute		Muiti-Line			
Dт	ייות	RENCES					
1.	Nam					Phone Number	
	Addı	ress					
2.	Nam	ne e				Phone Number	
	Addı	ress					
3.	Nam	ne				Phone Number	
	Addı	ress					
4.	Nam	e				Phone Number	
	Addı	ress					

Authorization for Investigation and Release of Information and Release of Claims To be read and signed by applicant

I hereby certify that the facts set forth above in my employment application are true and complete to the best of my knowledge. I authorize Hammond Lumber Company to investigate all information set forth in my application, by contacting all my prior employers and other references set forth above, and by any and all other means authorized or permitted by law. I understand that if I am hired, omissions or false or misleading statements in this application or in interviews will be grounds for immediate termination of my employment.

I hereby release Hammond Lumber Company and any and all persons and organizations providing any information to Hammond Lumber Company from any and all claims and liabilities of any kind resulting from any such investigation or from the furnishing of any information and response to such an investigation.

I hereby understand and acknowledge that any employment relationship with Hammond Lumber Company is of an "at will" nature. This means that all employment with the Company is of an indefinite duration, and is terminable at any time for any reason, with our without notice, either by the employee or by the Company. The only persons who have the authority to bind the Company to employment on any other basis are the Company President and the Vice President, and any such agreement must be in writing and signed by one of them.

Dated	Signature
	Print Full Name