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WORK EXPERIENCE continued . . .

Previous Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Phone

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_ Rate of Pay: \$ \_\_\_\_\_ per \_\_\_\_\_

Job Title/ Duties: \_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
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Previous Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Phone

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_ Rate of Pay: \$ \_\_\_\_\_ per \_\_\_\_\_

Job Title/ Duties: \_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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OFFICE AND CLERICAL SKILLS: Check the task you can perform. Indicate years of experience.

| Task/Skill                | Years |
|---------------------------|-------|
| _____ MS Office products  | _____ |
| _____ Computer Accounting | _____ |

Specialty Skills \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Attach any additional information you would like us to consider in determining your qualifications for the job you are applying for.

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This certifies that I have completed this application, and that it is true and complete to the best of my knowledge. I authorize Wilson Cabinetry to make such investigations as may be necessary to verify the information herein given, or to collect other information necessary to determine my suitability for employment. I understand that any incomplete, false or misleading information given in my application or interview may be grounds for disciplinary action, up to and including discharge from employment. I understand and agree to abide by all lawfully adopted policies, rules and procedures adopted by Wilson Cabinetry.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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