

Story Roofing Company, Inc.

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE OF APPLICATION: _____

Name:

First

Middle

Last

Address:

Street

City, State

Zip

Contact Information:

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Telephone Number

Email

Date Available to Start: _____

Desired Pay Rate: _____

Please list the type of Roofing you're experienced in (Steep Slope/Commercial Flat), what materials you've installed, special skills, or other items that may contribute to your abilities in performing the position.

Dotted lines for text entry.

Personal Information:

Date of Birth: _____

Social Security Number: _____

Driver's License Number: _____

In case of Emergency ~ Contact:

Name: _____

Address: _____

Phone Number: _____

Relationship to you: _____