



SHOP

THE TANEY CORPORATION

Employment Application

THE TANEY CORPORATION firmly commits to a policy of equal employment opportunity for applicants and employees, consistently complying with local, state, and federal laws. The Company's policy is to employ qualified persons without discrimination against race, religion, color, sex, national origin, age, physical or mental handicap/disability unrelated to the performance of the job, veteran status or any other group protected by federal/state/local law.

Please note that The Taney Corporation conducts background checks & pre-employment drug screening.

Date: _____

Name: _____

Last First Middle

Current Address: _____

Street City State Zip

How long have you lived there? _____

Previous Address: _____

Street City State Zip

How long did you live there? _____

Telephone: (Cell) _____ Email Address: _____

(Home) _____

How were you referred to The Taney Corporation? _____

Are you 18 years or older? YES _____ NO _____ Height _____ Weight _____

Have you ever been convicted of a felony that has not been expunged? YES _____ NO _____

How many hours can you work weekly? _____

Can you work overtime? _____

Are you legally eligible to work in the United States? _____ (proof of eligibility will be required if hired)

EMPLOYMENT DESIRED

Position: _____ Date you can start: _____

Salary/Wage Requested: _____ Are you currently working: _____

Have you ever applied or worked here before? _____

EDUCATION

High School or GED & Location: _____ did you graduate? _____

Number of Years completed: _____

Post High School Education: _____ did you graduate? _____

Degree, Certificate, or Subjects Studied: _____

Business or Trade School: _____ did you graduate? _____

Degree or Subjects Studied: _____

FORMER EMPLOYERS

***Please list your last 3 employers, starting with the most recent first**

Name of Employer:	Employer's Address (Street, City, State, Zip Code):
Type of Business:	Supervisor's Name, Title and Phone Number:
Your Job Title:	Was this a full time position?
Dates of Employment (From: Month/Day/Year)	To: (Month/Day/Year)
Job Duties:	
Reason for Leaving:	

Name of Employer:	Employer's Address (Street, City, State, Zip Code):
Type of Business:	Supervisor's Name, Title and Phone Number:
Your Job Title:	Was this a full time position?
Dates of Employment (From: Month/Day/Year)	To: (Month/Day/Year)
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Dates of Employment (From: Month/Day/Year)	To: (Month/Day/Year)
Job Duties:	
Reason for Leaving:	

May we contact your former employers? _____

REFERENCES

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

May we contact your references? _____

UNDER MARYLAND LAW AN EMPLOYER MAY NOT REQUIRE OR DEMAND ANY APPLICANT FOR EMPLOYMENT OR PROSPECTIVE EMPLOYMENT OR ANY EMPLOYEE TO SUBMIT TO OR TAKE A POLYGRAPH, LIE DETECTOR OR SIMILAR TEST OR EXAMINATION AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT.

SIGNATURE: _____ DATE: _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for may result in rejection of my application, and is cause for dismissal. Further, I understand and agree that my employment for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

SIGNATURE: _____ DATE: _____

The Taney Corporation

5130 Allendale Lane

Taneytown, MD 21787

Attn: Lori L Owens, Director of Human Resources

E-mail: lorio@taneystair.com

Telephone: 410-756-6671, ext. 1130, Fax # 410-756-9952

***To complete your application, please answer the questions on the next page**

- 1.) Do you have any woodworking experience? _____
- 2.) What equipment have you used such as: saws, routers, lathes, etc.?

- 3.) Do you tend to pick up on new jobs fast? _____
- 4.) Can you read a rule? _____ to 1/16 of an inch? _____
- 5.) Do you have any problems with Mathematics such as Addition & Subtraction?

- 6.) Are you mathematically inclined? _____
- 7.) Have you been absent from your last employment? If so, how often?

- 8.) Do you have work shoes or boots? (Must be fully leather bound, No sneakers)

- 9.) Are you able to wear safety glasses and hearing protection? _____
- 10.) Sometimes we may have to work overtime and/or Saturdays, can you do that?
