

Our company is an equal opportunity employer that does not discriminate because of sex, age, race, color, religious creed, national origin, ancestry, non-Job related handicap or disability, service in the Armed Forces of the United States, Citizen-ship or any other characteristic protected by applicable federal or state laws.

Application for Employment

Drug Policy: It is our intent to maintain a safe, productive work environment, consistent with that objective, you will be requested to submit to a drug test in conjunction with an offer of employment.

	cations or product specialties here off your application in person at the	,		1 3.
Distribution	Lady Lake	Leesburg	Mount Dora	Ocala
3238 NE 37th Place Wildwood, FL 34785	722 Duck Lake Road The Villages, FL 32159	700 E Main Street Leesburg FL 34748	2411 Old US Hwy 441 Mount Dora, FL 32757	1432 SW 15th Avenue Ocala, FL 34474
Door Plant	Garage Doors	Truss Plant	Windows	
700 E Main Street Leesburg FL 34748	722 Duck Lake Road The Villages, FL 32159	200 E Main Street Leesburg FL 34748	312 E Main Street Leesburg FL 34748	
General Informati	ON (Please type or print clearly)			
Name (First Middle Last)				
Mailing Address				
City State Zip				
Phone (Home)		Phone (Cell)		
Driver's license number and	state issued	Email Addres	SS	
Are you legally authorize	ed to work in the United State	es? Yes No		
(if you answer yes, you must c	omplete the I-9 form required by th	e U.S. Immigration and Naturaliz	ration Service no later than your da	ate of hire.)
Position applied for			What is your desired salary	range
Are you applying for	Full Time Part Tin	me Temporary	When would you be able to	start? (Month, Day, Year)
If Part Time or Temporary, lis	t your days and times of availabi	lity		
Have you ever filed an a	application with us before?	Yes No and i	if "yes," when?	
Have you ever been er	mployed by this company?	Yes No and i	if "yes," when and what was you	ur job title?
List any of your relatives wo	rking for this company			
If recruited by a current emp	loyee, print their name here	How did you	hear about this job opening	
Can you travel if the job	requires it? Yes	No (If you answer yes, plea	ase fill out the Supplemental Com	pany Drivers Application.)

If applying for a position in production, installation, delivery or warehouse, are you able to twist, lift, bend, and kneel with a load of 60 lbs? Yes No If "no" state your limitations.
Background Information
Have you ever been convicted of a crime(s)? Yes No If yes, give dates and the nature of the crime.
Date Nature of crime
Date Nature of crime
NOTE: A "yes" answer to this question will not automatically bar you from employment. The nature, job-relatedness, severity, and date of the offense in relation to the position for which you are applying are considered. If you need more room, write on the back of this sheet.
Additional Information List any interests, hobbies, skills, or self-improvement programs that may help us evaluate your application
Military Background Did you serve in the armed forces? Yes No
If yes, describe any training received that is relevant to the position you are applying for.
Education Please complete the following.
High School City & State
From To Did you graduate? Yes No Diploma
Trade/Tech School City & State
From To Did you graduate? Yes No Certificate
College City & State
From To Did you graduate? Yes No Degree
College City & State
From To Did you graduate? Yes No Degree
List any achievements and/or awards received.

Work Experience

Start with your present or last 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 other protected status.

Current				
Company		From	To	_
Address		Phone		
Job Title		Supervisor_		
Duties Performed				
	Reason for Leaving			
May we contact your cu	urrent employer at this time? Yes	No		
2 Company		From	To	_
Address		Phone		
Job Title		Supervisor_		
Duties Performed				
	Reason for Leaving			
3 Company		From	To	_
Address		Phone		
Duties Performed				
	Reason for Leaving			
4 Company		From	To	
Address		Phone		
	Reason for Leaving			
Personal / Profes	ssional References Do not include far	nily members or past supervisors.		
1	Occupation	Dalahamak'	Dk	
Name	Occupation	Relationship	Phone	
Name	Occupation	Relationship	Phone	
3				
Name	Occupation	Relationshin	Phone	

Applicant Please read carefully and sign.

I understand that any employment will be on a 90-day introductory basis, and that my employment may be terminated, with or without cause or notice, at any time, at my option, or that of RoMac Building Supply, Inc. I understand that this is not a contract. I understand that no management representative has any authority to enter into any agreement for continuing employment for any specific period of time or which is contrary to the forgoing. I give RoMac Building Supply, Inc. permission to contact any or all of my previous employers and references and authorize them to provide all information requested of them by RoMac Building Supply, Inc. I authorize RoMac Building Supply, Inc. to obtain, use, and rely upon that information in relation to my application. I have provided truthful and complete responses to all inquiries in the application and understand that the discovery of any falsification or omission constitutes a ground for immediate dismissal. If employed by RoMac Building Supply, Inc., I will abide by its rules and regulations, which I understand are subject to change by RoMac Building Supply, Inc.

Should I become employed, as a condition of my employment, I agree to waive my right to a trial by jury in any action or proceeding involving any claim, whether statutory or at common law, related to or arising out of my employment or the termination of employment, including claims of discrimination. I understand that I am waiving my right to jury trial voluntarily and knowingly and free from duress or coercion. I understand that I have the right to consult with a person of my choosing, including an attorney, before signing this document.

Print your full name			
Signature of Applicant		Date	
For Interna	al Use Only		
Interviewed? Yes No			
1st Interview by	Date		
2nd Interview by	Date		
Interview comments and results.			
Full Time Part Time Temporary Starting Rate	e \$ Star	ting Date	
Department Job Title	Locat	ion	
Managers Signature		Date	
CEOs Signature		Date	
	Approval Numb	er	