## Thank you for applying!

Please fax the completed resume to (319) 377-9085 or email it to employment@hameshomes.com



APPLICANT INFORMATION																			
Last Name*						First*						M.I.		Date	е				
Street Ad	dress	ress											Apartment/Unit #						
City						State						ZIP							
Phone							E-mail	Address											
Date Available Social Secu					ecur	rity No.	ty No.				Desired Salary								
Position Applied for*																			
					N	0 🗆	If no, a	horized	I to w	ork in	the U.S	5.?	YES		NO				
Have you ever worked for this company? YES					N	0 🗆	If so, when?												
Have you ever been arrested?					N	0 🗆	If yes, explain												
EDUCATION																			
High School				Address															
Number of Yrs. Completed Did		Did you	graduate?		ES 🗌	NO 🗆													
College	College			A	ddress		·												
From		To Did you graduate		graduate?	Y	ES 🗌	NO 🗆	D	egree	e									
Other						A	ddress												
From		To Did you graduate?			Y	ES 🗌	NO Degree												
REFERE	NCES	;																	
Please list three professional or personal references.																			
Full Name					Relation					nip									
Company						Phone													
Full Name							nip												
Company						Phone													
Full Name								nip											
Company								Phone	•										
MILITARY SERVICE																			
Branch									From	า		То							
Rank at Discharge										Type of Discharge									
If other than general, explain																			

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PREVIOUS EMPLOYMENT								
Company			Phone					
Address			Supervisor					
Job Title			Starting Salary	\$	Ending Salary	\$		
Responsibilities								
From	То	Reason for Leaving						
May we contact yo	ur previous super	visor for a reference	NO 🗆					
Company			Phone					
Address			Supervisor					
Job Title			\$	Ending Salary	\$			
Responsibilities								
From	То	Reason for Leaving						
May we contact yo	ur previous super	visor for a reference	NO 🗌					
Company			Phone					
Address			Supervisor					
Job Title			\$	Ending Salary	\$			
Responsibilities								
From	То	Reason for Leaving						
May we contact yo	ur previous super	visor for a reference	NO 🗆					
Company			Phone					
Address			Supervisor					
Job Title			\$	Ending Salary	\$			
Responsibilities								
From	То	Reason for Leaving						
May we contact yo	ur previous super	visor for a reference	NO 🗆					
OFFICE/COMPUTER SKILLS								
Personal Comp			Accounting Software					
☐ Windows			Typing WPM					
☐ Microsoft Office	e Word		Copier/Fax/Printer					
☐ Microsoft Office	e Excel		Accounts Payable					
☐ Microsoft Office	Outlook		☐ Payroll					
☐ Microsoft Office	Other		Other					

## MAINTENANCE/SERVICE SKILLS

Please complete the following: Please check the column that closest describes your experience:

	No Experience (would like to learn)	Some Experience (still need direction)	Much Experience (minimal direction needed)	Comments
Supervision				
Equipment operation – list type				
Equipment maintenance – list type				
Shingle Installation and Repair				
Vinyl siding & soffit/fascia installation				
Install ABS-PVC drain lines				
Vinyl skirting installation				
Carpet installing, seaming				
Plumbing, faucet, toilet, W/H install				
Electric lights receptacles, switch instal	ı			
Basic electric theory use of multi- meter, schematics, troubleshooting				
Rough carpentry				
Basic carpentry, trim and installation				
Hang doors, interior/exterior				
Wallboard replacement				
Drywall repair and texturing				
Cabinet installation				
Installing and repairing laminate				
Window glazing & screen repair				
Painting				
Ceiling work				
Mobile home installation				
Mobile home repair				
Vehicle Repair				
Apartment Maintenance				
Landscaping/mowing				
Operation of power tools, please list				
Operation of pneumatic tools, please list				
Other skill? – please list				
Other skill? – please list				
Other licenses, permits and certification	ns			·

DRIVERS LICENSE INFORMATION
If driving background check is required, please provide: Driver's License # State
Class A CDL? □Yes □No
Current DOT Physical?
I understand that if my job duties include driving a vehicle over 10,000 pounds, I will be required to complete and pass a physical exam and drug/alcohol test. I further authorize any health care professional or testing facility which performs such an examination or who has other information concerning my physical, mental or other medical status to release such information to the company.
I certify that I have read and understood the above statement. I certify that the answers given herein are true and complete.
Signature of Applicant* Date
ADDITIONAL INFORMATION
State any additional information you feel may be helpful to us in considering your application
Date of Birth: If needed for background check (Month/day only is acceptable)
ABILITY TO FULFILL JOB REQUIREMENTS
Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB
FOR WHICH YOU ARE APPLYING.
Are you capable of performing, in a reasonable manner, with our without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.
□Yes □No
DISCLAIMER AND SIGNATURE
I certify that my answers are true and complete to the best of my knowledge. I agree, authorize and understand that Hames or its agents may investigate my background to ascertain any and all information of concern to my record, including a criminal background check. I authorize and release employers, schools, government agencies and persons named herein from all liability for any damages on account of furnishing such information.
I also agree and understand that under the Fair Credit Reporting Act, Public Law 91-508, I have been informed that this investigation may also include a Consumer Report, including information regarding my character, general reputation, personal characteristics and mode of living.
I agree to complete such examinations as may be required to complete my employment file.
In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.
I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Hames is of an "AT WILL" nature. This means that I may resign at any time and Hames may discharge me at any time with or without cause. I further understand that this "AT WILL" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Hames.
Signature* Date