

Denk & Roche

Pre-Employment Application Form

Current Date _____ Have you worked for Denk & Roche before _____ Dates _____

First & Last Name _____

Street Address _____

City, State and Zip Code _____

E-Mail Address _____

Primary Phone (with area code) _____ Cell Phone (with area code) _____

Are you a Chicago Housing Authority Resident _____ Section 3 _____ Other _____

Journeyman _____ How many years of experience? _____ Union Apprentice _____ What year _____

Are you a Member of a Carpenters Union _____ Local# _____ County _____

Are you willing to travel out of state? Yes _____ No _____

Skills/abilities (mark the ones that apply)

- | | | | |
|------------------------------|-------|-----------------------------------|-------|
| • Frame, walls, decks, roofs | _____ | Metal Studs | _____ |
| • Layout/read prints | _____ | Taping | _____ |
| • Backout/interior rough | _____ | Welding | _____ |
| • Exterior trim/siding | _____ | Experience in running taping tool | _____ |
| • Interior trim/cabinets | _____ | Acoustical ceilings | _____ |
| • Cut roofs | _____ | Architectural millwork | _____ |
| • Cut Stairs | _____ | Commercial hardware | _____ |
| • Stair Railings | _____ | Solid Surface Tops | _____ |
| • Metal Panels | _____ | OSHA 30 | _____ |
| • Build out Work | _____ | Scaffold Card | _____ |
| • Drywall | _____ | Other safety | _____ |

Past Employment (name of company, dates of employment, job task)

1. _____
2. _____

Education (level of schooling achieved and dates)

HighSchool _____ College _____

As Part of Denk and Roche Builders Drug / Alcohol Policy any applicant being considered for employment must successfully complete a Drug / Alcohol test. I acknowledge the fact that I will be required to travel to the assigned location for a Specimen Collection on the designated date. As I am not currently employed by Denk and Roche Builders I will not be compensated for my time or travel expense, and will have a valid Government Photo ID in my possession for the specimen collection process.

Signature _____

Print Name _____ Date _____

*** Include any additional notes or recommendations on the back