



# Application for Employment

1202 Bergen Parkway, Suite 110  
Evergreen, CO 80439 • 800 525-7840

An Equal Opportunity Employer

Position for which you are applying:		Today's date:
PERSONAL INFORMATION		
Last Name	First Name	Middle Initial
Street Address/ Mailing Address		
City	State	Zip Code
Home Phone / Email Address	Emergency Contact Name & Phone Number	

GENERAL INFORMATION		
	Check One	
	Yes	No
1. Are you at least 18 years of age?	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever been convicted of a felony?	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you willing to submit to a pre-employment drug test, physical exam, and background investigation?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are you willing to submit to a post-accident drug test following any on-the-job accident you are involved in?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation?	<input type="checkbox"/>	<input type="checkbox"/>

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED**

I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire or, if hired, termination.

I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the United States of America.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, current or past employer to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that Kalman Floor has zero tolerance policies for drugs/alcohol and violence on the job.

I have read, understand, and by my signature consent to these statements.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

APPLICANT EEO DATA FORM

This information being requested is optional and is being collected for the purpose of reporting to Federal and Equal Employment Opportunity Agencies and will not be considered as part of the application for employment. It will be separated from the application. Refusal to answer will not result in adverse treatment of any applicant.

RACE/ETHNICITY (Please identify both Race and Ethnicity)

Race (check only one)

- White
- Black/African American
- Asian
- Native Hawaiian/Other Pacific Islander
- American Indian/Alaska Native
- 2 or more races

Ethnicity (check only one)

- Hispanic or Latino
- Not Hispanic or Latino

SEX

Male

Female

Date of Birth

\_\_\_\_\_

Position/Title for which you are applying:

\_\_\_\_\_

