



LEININGER

CABINET & WOODWORKING INC.

116 SOUTH FORBES ROAD
LEXINGTON, KENTUCKY 40511
859 252-0429
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<http://www.lcw-inc.com>



Leininger Cabinet & Woodworking Inc.. is an open shop employer that has been in business since 1950. In those years, the company has grown substantially. This growth has been achieved in a large part through continuous co-operation and input from our employees.

Our continued goal and effort is to maintain and improve that relationship growth.

New employees are a critical part of this relationship, and because of that, we place extreme importance on the hiring process not only for their potential benefit but for the continued welfare and benefit of all our employees.

This form identifies many of the areas we feel to be extremely important as part of our continued improvement.

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS FOR COMPLETING APPLICATION

This application is the first in a series of steps towards possible employment by Leininger .

We ask that you review carefully all information and answer all questions on the following pages. It is only through a properly completed application that we can determine your qualifications for this position.

Please respond to the following questions – one or two sentences is all that is required.

- What do you feel you can contribute to Leininger Cabinet, Inc.?

- Why should Leininger Cabinet Inc. hire you versus someone else?

- What is your primary long term job related goal?

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap or any other legally protected status.

(PLEASE PRINT)

POSITION APPLIED FOR _____ DATE OF APPLICATION _____

Last Name _____ First Name _____ Middle Initial _____

ADDRESS _____
Number Street City State Zip Code

TELEPHONE NUMBER(S) _____ CELL _____

EMAIL ADDRESS _____ SALARY REQUIRED _____
Must have wage amount

Have you ever filed an application with us before? (yes or no) _____ Date _____

Have you ever been employed with us before? (yes or no) _____ Date _____

How were you referred to Leininger Cabinet, Inc.? _____

Are you currently employed? _____ If yes, where? _____

May we contact your employer? _____

Are you currently on "Lay off" status and subject to recall? _____

Are you obligated in any way to any other employment at this time (yes or no) _____ If yes, explain _____

Type of employment you are seeking: Full time _____ Part time _____ Temporary _____

If seeking other than full time employment give explanation as to circumstances _____

If a job offer is made, can you provide evidence of authorization to work in the United States? _____

NOTE: If employed by Leininger Cabinet Inc., Inc. you will be required by the Federal National Immigration Board to complete an I-9 form, Employment Eligibility Verification form. You must provide required Identification at time of hire.

On what date would you be available? _____ Do you have reliable transportation? _____

Do you have a valid driver's license? _____ Do you have a CDL? _____

List any safety training programs you have participated in: _____

PLEASE FILL OUT THOSE AREAS IN WHICH YOU ARE SKILLED.

NOTE: Write in the number that corresponds to your experience in each operation.
If no experience in that field leave blank.

- 4 EXCELLENT**
- 3 VERY GOOD**
- 2 GOOD**
- 1 SOME**

	EXPERIENCE RATING		EXPERIENCE RATING
Custom Cabinet Making		Production Cabinet Making	
Table Saw	_____	Table Saw	_____
Sliding Panel Saw	_____	Beam Saw	_____
Band Saw	_____	Edgebander	_____
Radial Arm Saw	_____	CNC Point to Point	_____
Jointer	_____	CNC Panel Router	_____
Planer (Thicknesser)	_____	Case Clamp	_____
Spindle Shaper	_____	Dowel Inserter	_____
Mortiser	_____	Hardware Installation	_____
Tenoner	_____		
Wide Belt Sander	_____	Cabinet Installation	_____
Edge Sander	_____	HPDL Application	_____
Power Hand Tools	_____	Solid Surface manufacture	_____
Hand Tools	_____	Metal/Stone/Plastics	_____
Wood Finishing			
Color Matching	_____	CNC programing /operation	_____
Staining/shading	_____	Blueprint Reading	_____
Hand spraying	_____	Cut list preparation	_____
Line Spraying	_____	Auto Cad Drafting	_____
Touch up/ repair	_____		

What types of software do you have experience with if any? Please describe. _____

Please describe any special skills you possess that you think would be helpful and productive to a manufacturer such as Leininger. _____

Please describe any military service _____

Employment 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, handicap or other protected status.

EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE/SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				
EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
PHONE NUMBER(S)		HOURLY RATE/SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				
EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
PHONE NUMBER(S)		HOURLY RATE/SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				

EDUCATION

	NAME AND LOCATION	GRADUATE? - DEGREE?	MAJOR / SUBJECTS OF STUDY
HIGH SCHOOL			
COLLEGE OR UNIVERSITY			
SPECIAL TRAINING, TRADE SCHOOL, ETC.			
OTHER EDUCATION			

Do you speak any other languages fluently? _____ If so which? _____

Since the construction industry is dangerous, it is a primary concern of Leininger Cabinet Inc. to provide as safe a work place as possible, free from drugs and alcohol for all employees. Because our business is one of interdependence among workers, Leininger, Inc. considers it imperative to eliminate the threat of drug and alcohol related accidents from our jobsites.

Leininger is committed to provide a safe, healthy and productive Work environment. Therefore, to meet this objective, as well as our obligations under applicable federal and state laws, Leininger has a Drug-Free Workplace Policy and Program.

Please read the following and sign:

I understand I must comply with Leininger’s Drug-Free Workplace Policy that Leininger establishes conditions under which I may be required to provide a breath, blood, saliva or urine sample for drug and / or alcohol testing.

_____ Date

_____ Applicant’s Signature

_____ Date

_____ Applicant’s Name (Printed)

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision and release all parties from all liability for any damage that may result from furnishing same to you. I further understand that in the event of employment any 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 and safety requirements of the employer.

Signature: _____ Date: _____

Please answer the following questions to the best of your ability:

- How many board feet are in a board that is 9 inches wide and 12 feet long and 1 inch thick?
- Why would every 16th number on a tape rule be highlighted in red? i.e. 16,32,48 etc?
- How many square feet of plywood would be in 7 sheets 4' x 8'?
- What formula denotes the area of a circle? The circumference?
- What is the complement of a 50 degree angle? The supplement?
- Convert 159 inches into feet and inches.
- How many pieces of plywood that were 24w" x 16"l could you cut out of a 4x8 sheet? (Disregard kerf)
- In which direction does a table saw blade turn? A router bit?
- What is the decimal equivalent of $\frac{3}{4}$?
- Which tool would you use to cut a 10'x 10' board perfectly in half with a clean edge?
- Describe briefly how you would go about figuring out *about* how many square yards of Astro turf there are in all the football stadiums in the U.S.

This is the end of the job application. Please read the following information before signing and submitting your application.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON WITH OR WITHOUT CAUSE OR NOTICE.