



**Stars Ferry Building Supplies, Inc.**

20 S. 300 W. Burley, ID 83318  
(208) 678-5562 • Fax (208) 678-5566

Email: [sales@starsferry.biz](mailto:sales@starsferry.biz)  
[www.starsferry.biz](http://www.starsferry.biz)

## **Employment Application**

Date: \_\_\_\_\_

Full Name (Last, First, MI): \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: (Street, City, State, Zip) \_\_\_\_\_

Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

Date Available: \_\_\_\_\_ Desired Salary: \_\_\_\_\_ Position Applying For: \_\_\_\_\_

Are you authorized to work in the U.S. \_\_\_\_\_

Have you ever worked for this company? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Do any friends or relatives work here? \_\_\_\_\_ If yes who? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If yes, may we contact your current employer? \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Note: Having a conviction does not immediately dismiss opportunity for employment. Many factors including type of crime, how long ago crime was committed, and relation to job position will be considered.

What type of driver's license do you hold? \_\_\_\_\_ State Issued? \_\_\_\_\_ Exp Date \_\_\_\_\_

Driver's License # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Note: Date of Birth will only be used to be supplied to the insurance company to determine driver insurability. If you are not applying for a driver job, then this is not required. We will not use the DOB to hire based on age.

List traffic violations for the last 3 years, include month/year and description of violation:

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List your education experience from High School on. Include school attended, city, state, degree, and dates attended:

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List all work history for the last 10 years starting with the most recent job.

Name of company \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Position held \_\_\_\_\_ Duties \_\_\_\_\_

Date started \_\_\_\_\_ Date ended \_\_\_\_\_ Salary start/ending \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Supervisor \_\_\_\_\_ May we contact \_\_\_\_\_

Name of company \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Position held \_\_\_\_\_ Duties \_\_\_\_\_

Date started \_\_\_\_\_ Date ended \_\_\_\_\_ Salary start/ending \_\_\_\_\_

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Name of company\_\_\_\_\_

Address\_\_\_\_\_ Phone\_\_\_\_\_

Position held\_\_\_\_\_ Duties\_\_\_\_\_

Date started\_\_\_\_\_ Date ended\_\_\_\_\_ Salary start/ending\_\_\_\_\_

Reason for leaving\_\_\_\_\_

Supervisor\_\_\_\_\_ May we contact\_\_\_\_\_

Explain gaps in employment (if any):

\_\_\_\_\_  
\_\_\_\_\_

Describe any other specialized training, skills, rewards, qualifications, etc:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list your references:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview(s), may result in my release. I understand that Stars Ferry Building Supplies, Inc is a drug and alcohol free workplace. I also understand that this information may be used for but not limited to driving, background and employment checks.

Signature\_\_\_\_\_ Date\_\_\_\_\_

Please return with resume to : [jc@starsferry.biz](mailto:jc@starsferry.biz) or by mail/in-person 20 S 300 W Burley, ID 83318 or fax 800-319-6846.