EMPLOYMENT APPLICATION
SOUTHERN FURNITURE COMPANY OF CONOVER, INC.

Name (Print) _____ Date _____
(Last) (First) (Middle)

Address _____
(Street,Rt., Box) (City) (State) (Zip)

Social Security #_____

Phone No. _____ If no phone, list neighbor's or other number where you can be reached _____

In case of emergency, notify: _____
(Name) (Address) (Phone)

Have you ever worked for Southern Furniture Company or any of its subsidiaries? Yes ____ No ____

If yes, which plant _____ When _____

What type of work or what job are you seeking? _____

Approximate earnings expected (complete one of the following): _____ per hour _____ per week

_____ per month _____ per year

Did you apply here as a result of:

Newspaper Ad____ Radio Ad____ Sign out front____ Referred by friend____ Other_____

List machines on which you have experience:

Production machines _____

Office machines _____

I understand that if offered a position I will be required to take and pass a drug screening test and complete a medical questionnaire. I understand also that, if hired, I may be required at the company's discretion to take and pass a drug/alcohol test as a condition of employment and to consent to such a test.

	Elementary	Secondary	College/University	Graduate/Vocational
SCHOOL NAME ➡				
No. Years Completed ➡	(Circle) 1 2 3 4 5 6 7 8	(Circle) 9 10 11 12	(Circle) 1 2 3 4	(Circle) 1 2 3 4
Last Year Attended ➡			Degree or Diploma Earned ➡	

PREVIOUS EMPLOYMENT RECORD

(List your last job first)

From Mo.	From Yr.	To Mo.	To Yr.	Company	Position	Wage	Reason Left
				Name:			
				City & State:			
				Name:			
				City & State:			
				Name:			
				City & State:			
				Name:			
				City & State:			

Neither this application nor any future employment status constitutes a contract of employment between the parties and either party can terminate the employment at any time for any reason.

_____
Applicant Signature