



APPLICATION FOR EMPLOYMENT

I wish to be considered for employment with Cavco Industries, Inc. or one of its subsidiaries (the "Company"). I hereby authorize the references listed below to give the Company any and all information concerning my previous employment and any pertinent information they may have regarding my work performance and character and I release all persons and entities from all liability with respect to furnishing such information to the Company. I understand and agree that, if employed, the period of my employment shall be at will and that I may terminate my employment with the Company or be terminated by the Company at any time with or without cause and with or without notice at the option of either myself or the Company. I further understand that this term and condition of my employment may not be changed except by a written agreement specifically for such purpose entered into between myself and the Company and signed by the President of the Company and that such term and condition of my employment shall not be affected by any other employment policies or programs the Company may have. I understand that this application is not a contract or guarantee of employment or continued employment. I also understand that the Company has policies and programs, in writing and otherwise, relating to other terms and conditions of my employment and that such policies and programs are subject to change at any time for any reason by the Company at its discretion and that I have no vested rights in any Company policy or program now or hereafter in effect. I certify that the information contained in the Application for Employment with the Company is correct to the best of my knowledge. I understand that this information is important to the Company and will be used by it in considering my employment and that any falsification of this information may result in the Company's refusal to hire me or, if then employed, in my immediate dismissal.

Name (Last, First, Middle Initial) Social Security # Are you legally authorized to work in the U.S [] Yes [] No

Home Address Telephone (Area Code & #): Cell phone (Area Code & #): Email:

Name, Address & Phone # of person who will always know where you can be contacted

Have you ever been convicted of a crime (excluding minor traffic offenses)? [] Yes [] No If Yes Explanation

Position you are applying for Pay Desired \$ Date available for work Are you willing to relocate? [] Yes [] No Applying For [] Permanent [] Part-Time

Have you ever applied for employment or been employed by Cavco Industries, Inc. or any of its subsidiary companies? [] Yes [] No If Yes When? Where?

Do you currently have any relatives working for Cavco Industries?

Do not answer any of the following three questions unless the company has checked a box preceding a question, thereby indicating that the information is required for a bona fide occupational qualification or is needed for other legally permissible reasons.

[] Do you have a valid motor vehicle drivers license? [] Yes [] No [] Do you plan to commute to and from work with a licenced and insured motorized vehicle? [] Yes [] No [] Are there any state or federal restrictions on your drivers license? [] Yes [] No If Yes Details

[] Have your driving privileges ever been revoked or suspended? [] Yes [] No If Yes Details

In case of emergency notify Name Phone # Address

Name & Location		# of Years Attended	Degree Obtained	Major Studies
High School				
College				
Trade Business Or Other				
From/To	Name, Address & Phone #	Pay	Position	Reason for leaving
1				
2				
3				
4				
5				

Name three persons not related to you, whom you have known for one year or more

Name	Address & Phone #	Years Acquainted

The company is an equal opportunity employer. The company treats all of its applicants and employees equally and without regard to race, color, religion, sex, national origin, age, disability, if otherwise qualified with reasonable accommodation, or any other factor prohibited by federal, state or local law. After an offer of employment has been extended, you may required to successfully pass a physical examination or drug test.

Date: _____ **Applicants Signature:** _____

HOW DID YOU HEAR ABOUT US?

- Walk-In
- Referral By who? _____
- Ad Where? _____
- Social Media Which? _____