



Application for Employment

EQUAL OPPORTUNITY EMPLOYER: It is our policy to abide by all federal, state and local laws prohibiting employment discrimination based on a person's race, color, religion, creed, sex, national origin, age, disability status, protected veteran status, or any other characteristic protected by law.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Cell Phone: _____ Email: _____

Home Phone: _____ Desired Salary: \$ _____

Position Applied for: _____ Date Available: _____

Are you authorized to work in the United States? YES [] NO []

Have you ever worked for Cavco Industries, or any of its subsidiary companies? YES [] NO []

If Yes: When: _____ Where: _____

Do you currently have any relative working for Cavco Industries or subsidiary companies? YES [] NO []

If Yes: Who: _____ Where: _____

Applying for: Full Time _____ Part Time _____

How did you hear about our opportunity? _____

Education/Skills

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO GED: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Additional Skills: _____

Current and Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your previous supervisor for a reference? Phone: _____

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your previous supervisor for a reference? Phone: _____

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your previous supervisor for a reference? Phone: _____

Professional References

Please list three professional references of someone who is not a relative.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____

Disclaimer and Signature

I wish to be considered for employment with Cavco Industries, Inc. or it's subsidiaries (the "Company"). I hereby authorize the references listed above 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 certify that the information contained in the Application for Employment is correct to the best of my knowledge. I understand that this information will be used by the Company 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. 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 understand that this application is not a contract or guarantee of employment.

Signature: _____ Date: _____

Additional Information Form

Agreement (Please read the following statement carefully)

If employed by Cavco Industries, Inc. or it's subsidiaries (the "Company"), I agree to abide by the policies and procedures of the Company, which include the Anti-Harassment Policy. 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 no manager or representative of the Company other than the President has any authority to enter into any agreement, oral or written, on behalf the Company for a term of employment or to make any assurance or promise of continued employment. I 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 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.

REFERENCE CHECKS: I wish to be considered for employment with Cavco Industries, Inc. or its subsidiaries (the "Company"). I hereby authorize the references listed above 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.

DRUG TESTING: I understand and agree that, subject to applicable law, I may be required to take a drug test. I also understand that if I test positive for the presence of drugs, I will be ineligible for employment with the company.

BACKGROUND CHECK: I understand and agree that, subject to applicable law, the Company may obtain public records about me as part of an internal background investigation.

FOR ARIZONA APPLICANTS: To the extent required by applicable law, a smoke-free workplace is maintained.

FOR CALIFORNIA APPLICANTS: I further understand that the Company may obtain public records about me as part of an internal background investigation and that I may waive my right to receive a copy of such public records by checking this box [].

Signature: _____ Date: _____

How Did You Hear About Us?

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

Do not write below this line – For Internal Use ONLY

Employed: YES [] NO [] Date Started: _____

Job Title: _____ Compensation: _____ per _____

Supervisor: _____ Badge #: _____

Department: _____ Referred by: _____

Does this position require a Background Check YES [] NO []