



Employment Application

Applicant General Information

Position(s) Applying For: _____ Date: _____

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

Address: _____
Street Address Apartment/Unit #
City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Desired Salary:\$ _____

Are you available to work (check all that apply): Part Time [] Full Time [] Shift Work [] Temporary []

If applying to Part Time, Shift Work and/or Temporary, what days and hours are you available?

Are you at least 18 years old? YES NO
*Note: If under 18, hire is subject to verification that you are of minimum legal age. [] []

If hired, do you have a reliable means of transportation to and from work? YES NO Can you travel if the position requires it? YES NO [] [] [] []

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO [] [] [] []

Have you ever worked for this company? YES NO If yes, when? _____ [] []

Have you previously applied to work here? YES NO If yes, for what position(s)? _____ [] []

Do you have friends and/or relatives working for this company? YES NO If yes, name(s): _____ [] []

Did anyone refer you to us? YES NO If yes, who? _____ [] []

Are you able to perform the essential job functions for which you are applying with or without reasonable accommodation? YES NO *Note: We comply with the ADA and will provide reasonable accommodation to applicants and employees with disabilities whenever possible. [] []

Have you ever been convicted of a felony? YES NO [] []

If yes, explain: _____

Employment Experience (Last Three Employers)

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

Dates Employed (Month/Year) From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

Dates Employed (Month/Year) From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

Dates Employed (Month/Year) From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Please explain any gaps in your employment history:

Please list any other experience, job related skills, certifications, or other qualifications that you believe should be considered in evaluating your qualifications for employment:

Education

High School: _____

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

College/University: _____ Areas of Study/Major: _____

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

Graduate/ Professional School: _____ Areas of Study/Major: _____

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

Trade School: _____ Areas of Study/Major: _____

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

Other: _____ Areas of Study/Major: _____

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

Specialized Training, Skills, Extracurricular Activities, Certifications: _____

References

Please list three professional references of individuals who are not related to you.

Full Name/Relationship: _____ Email: _____

Company: _____ Phone: _____

Address: _____

Full Name/Relationship: _____ Email: _____

Company: _____ Phone: _____

Address: _____

Full Name/Relationship: _____ Email: _____

Company: _____ Phone: _____

Address: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Applicant Statement, Agreement and Signature

Please read carefully and initial each paragraph below. If there is anything that you do not understand, please ask.

____ I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the Company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporation, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

____ In the event of my employment with the Company, I understand that I am required to comply with all rules and regulation of the Company.

____ If hired, I understand and agree that my employment with the Company is at-will, and neither I, nor the company is required to continue the employment relationship for any specific term. I further understand that the Company or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.

____ I understand that safety of employees is extremely important to the Company and that the Company is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and health.

____ I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

____ I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.

____ I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed and the remainder of this Agreement shall be enforceable.

MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO ALL OF THE ABOVE TERMS.

Signature: _____ Date: _____

Name
(print): _____

Hoffmann + Uhlhorn Construction, Inc. will not discriminate against or harass any employee or applicant for employment because of race, color, creed, religion, national origin, sex, sexual orientation, disability, age, marital status, familial status, membership or activity in a local human rights commission, or status with regard to public assistance. We will take affirmative steps to ensure that all of our company's employment practices are free of discrimination. Such employment practices include, but are not limited to, the following: hiring, upgrading, demotion, transfer, recruitment or recruitment advertising, selection, layoff, disciplinary action, termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. We will provide reasonable accommodation to applicants and employees with disabilities whenever possible.