

# **APPLICATION for EMPLOYMENT**

| Please Print Position applied for      |                      |                        |                                | Date of application          |                     |  |  |
|--|----------------------|------------------------|--------------------------------|------------------------------|---------------------|--|--|
| Nama                                   |                      |                        |                                | Social Socurity              | . #                 |  |  |
| NameLa                                 | st                   | First                  | Middle                         | Social Security              | #                   |  |  |
| Address                                |                      |                        |                                |                              |                     |  |  |
| Telephone# ()                          | Street               | Cell # ()              | City<br>E-Mail Addres          | State                        | Zip Code            |  |  |
| Referral Source (Ho                    | w did you hear a     | ıbout us?)             |                                |                              |                     |  |  |
| Are you Over 18?<br>Have you ever been |                      | pefore?yesn            | o If <b>yes</b> , give dates a | and supervisors              |                     |  |  |
| Are you legally eligi                  | ble for employn      | ent in this country?   | yesno                          |                              |                     |  |  |
| Date available for w                   | ork/                 | _/                     | What is y                      | our desired salary range? \$ |                     |  |  |
| Type of employment                     | desired:I            | Full-TimePar           | t-TimeTempora                  | arySeasonal                  |                     |  |  |
| Driver's license num                   | ber if driving m     | ay be required in posi | tion for which you are a       | pplying                      | State               |  |  |
|  |                      |                        |                                |                              |                     |  |  |
| Employer                               | _                    | Te                     |                                | Dates employed: MoY          |                     |  |  |
|  |                      |                        | State                          |                              | (hourly or salary?) |  |  |
|  |                      |                        |                                |                              |                     |  |  |
|  |                      |                        |                                | May we contact for reference | -                   |  |  |
|  |                      |                        |                                |                              |                     |  |  |
| •                                      | • •                  |                        |                                |                              |                     |  |  |
| what were the things you               | inced least about in | - position             |                                |                              |                     |  |  |
| Employer                               |                      | Te                     | lephone #                      | Dates employed: MoYi         |                     |  |  |
| Street address                         |                      |                        | State                          |                              | (hourly or salary?) |  |  |
|  |                      |                        | Final Wage:                    |                              | (hourly or salary?) |  |  |
|  |                      |                        |                                | May we contact for reference | ce? yes no later    |  |  |
| Why did you leave?                     |                      |                        |                                |                              |                     |  |  |
|  |                      |                        |                                |                              |                     |  |  |
| What did you like most a               | oout your position?  |                        |                                |                              |                     |  |  |
| What were the things you               | liked least about th | e position?            |                                |                              |                     |  |  |
|  |                      |                        |                                | Dates employed: MoYı         | to MoYr             |  |  |
| Street address                         |                      | City                   | State                          | Starting Wage:               | (hourly or salary?) |  |  |
| Starting job title                     |                      | Final job title        |                                |                              | (hourly or salary?) |  |  |
|  |                      |                        |                                |                              | ce? yes no late     |  |  |
| Why did you leave?                     |                      |                        |                                |                              |                     |  |  |
| Summarize the type of we               | ork performed and jo | b responsibilities:    |                                |                              |                     |  |  |
| What did you like most a               | oout your position?  |                        |                                |                              |                     |  |  |
| What were the things you               | liked least about th | e position?            |                                |                              |                     |  |  |

## SKILLS AND QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

| Computer Skills (Check where appropriate. Include software titles and years of experience.) |        |          |        |  |
|---|--------|----------|--------|--|
| Word Processing   | Years: | E-Mail   | Years: |  |
| Spreadsheet   | Years: | Internet | Years: |  |
| Presentation  | Years: | Other    | Years: |  |

#### EDUCATIONAL BACKGROUND

Starting with your most recent school attended, provide the following information:

| School (include City/State) | Years Completed | Completed                                      | GPA/Class Rank | Major/Minor |
|-----------------------------|-----------------|--|----------------|-------------|
|                             |                 | DiplomaGED<br>Degree<br>Certification<br>Other |                |             |
|                             |                 | DiplomaGED<br>Degree<br>Certification<br>Other |                |             |

## REFERENCES

List names and telephone numbers of three business/work references who are **not** related to you and are **not** previous supervisors. If not applicable, list three schools or personal references who are **not** related to you.

| Name | Title | Relationship<br>to you | Telephone | Number of Years<br>Known |
|------|-------|------------------------|-----------|--------------------------|
|      |       | 2                      |           |                          |
|      |       |                        |           |                          |
|      |       |                        |           |                          |

#### APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment,

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States of America and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (1) eliminate me from further consideration for employment, or (2) may result in my immediate discharge from the employer's service, whenever it is discovered.

# DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant\_

| Date | / | / |
|------|---|---|
|      |   |   |

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