



APPLICATION FOR EMPLOYMENT

(Pre-Employment Questionnaire -- An Equal Opportunity Employer)

Name _____ Social Security Number _____ DATE _____

Present Address _____

Permanent Address _____

Phone No. _____ Are you 18 years or older? Yes _____ No _____

EMPLOYMENT HISTORY

Present Employer _____ Supervisors name _____

Address _____ Phone number _____

_____ Wage _____

Position Held _____ Employment dates _____ to _____

Reason for Leaving _____

Previous Employer _____ Supervisors name _____

Address _____ Phone number _____

_____ Wage _____

Position Held _____ Employment dates _____ to _____

Reason for Leaving _____

May we contact these employers? Yes _____ Prefer you don't _____

EMPLOYMENT DESIRED

Position _____ Date you can start _____ Wage Desired _____

EDUCATION

Circle Highest Grade Completed 9 10 11 12 College 1 2 3 4

Last School Attended Name _____

Address _____

Have you ever been convicted of a crime? *Yes ____ No ____ Any Driving convictions? Yes ____ No ____

*If yes, please explain fully on the space below. Conviction of a crime is not an automatic bar to employment, all circumstances will be considered.

RULES AND REGULATIONS

This is what we will guarantee you: (1) Health Insurance after 90 days; (2) Opportunity to receive a raise every 6 months; (3) transportation to and from the job site; (4) Unemployment benefits during seasonal layoffs; (5) Shirt and hat with company logo.

This is what we expect from you: (1) Be to work on time and arrive with a good attitude; (2) Be responsible for company equipment; (3) New customers on job site will be given company business card. (4) Honesty and Integrity.

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omission, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated at any time. I understand that no company representative, other than the President or Vice President can and then only when in writing and signed by the President or Vice President, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. **I agree to all of the above.**

Signature _____ (print) _____ Date _____