



GENERAL CONTRACTORS

EST. 1946

APPLICATION FOR EMPLOYMENT

Please Print

Position applied for: _____ Date of Application: _____

Name: _____ Social Security# ____-____-____
First Middle Last

Address: _____
Street City State ZipCode

Telephone# (____) _____ Cell#(____) _____ E-mail Address: _____

Referral Source (How did you hear about us?) _____

If you are under 18, and it is required, can you furnish a work permit? ___ Yes ___ No

If no, please explain: _____

Have you ever been employed here before? ___ Yes ___ No If yes, give dates: _____

Date available for work: ____/____/____ What is your desired salary range? \$ _____

Type of employment desired: ___ Full Time ___ Part Time ___ Temporary

Driver's License number if driving may be required in position for which you are applying: # _____

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and the nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? ___ Yes ___ No

If yes, Please provide date(s) and details: _____

EMPLOYMENT HISTORY Starting with your most recent employer, provide the following information:

Employer: _____ Telephone#: _____ Dates Employed: _____ to _____

Street Address: _____ City: _____ State: _____

Job Title: _____ May we contact for reference? ___ Yes ___ No

Reason for leaving: _____

Summarize the type of work and job responsibilities: _____

Employer: _____ Telephone#: _____ Dates Employed: _____ to _____

Street Address: _____ City: _____ State: _____

Job Title: _____ May we contact for reference? ___ Yes ___ No

Reason for leaving: _____

Summarize the type of work and job responsibilities: _____

Employer: _____ Telephone#: _____ Dates Employed: _____ to _____

Street Address: _____ City: _____ State: _____

Job Title: _____ May we contact for reference? ___ Yes ___ No

Reason for leaving: _____

Summarize the type of work and job responsibilities: _____

Continue to other side...

EDUCATIONAL BACKGROUND

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

Name & Location of School	Years Completed	Date Graduated	Subjects Studied

REFERENCES List names and telephone numbers of three business/work references who are NOT related to you.

Name	Relationship to you	Telephone	Number of Years Known

LIST OF EXPERIENCE

Please check the column that closest describes your experience:

NO **SOME** **MUCH**
EXPERIENCE **EXPERIENCE** **EXPERIENCE**
(would like to learn) (Still need direction) (Minimal direction needed)

COMMENTS

Supervision				
Survey/Stakeout/Building Layout				
Equipment Operation - List type				
Concrete Slabs				
Concrete footings & foundations				
Concrete finishing				
Welding				
Rough carpentry				
Layout walls				
Finish carpentry				
Metal roofing				
Metal/vinyl soffit/fascia				
Hang metal or wood doors				
Windows				
Steel stud framing				
Drywall finishing				
Acoustical ceiling tile work				
Steel Building erection				
Residential construction				
Commercial construction				
Other Skills? -Please list				
