

## **Application for Employment**

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Email to <u>lissa@rhenryconstruction.com</u> when completed.

Date:						
Last Name:	First Name:		Mid	Middle Name:		
Street Address:						
City:	State:	ZIP:				
Telephone:		_				
Email:						
Position applied for:						
How did you hear of this o	pening?					
When can you start?						
How long have you lived a	t above address?		_			
Are you a U.S. citizen or o may be required to provide			U.S. on an u	nrestricte	ed basis? (You	
Do you feel comfortable w	orking at heights	s? 🗆 Yes 🗀 No				
Do you have a valid driver	s license and reli	able transportatio	n? □ Yes □	l No		
Education						
School Nan	ne and Location		Year	Major	Degree	
High School:						
College:						
Post-College:						
Employment History	(Start with n	nost recent empl	oyer)			
Company Name:						
Address:	Telephone:					

Date Started:	Starting Wage:	Starting Position:	
Date Ended:	Ending Wage:	Ending Position:	
Name of Supervisor:			
May we contact? $\Box$	Yes 🗖 No		
Responsibilities:			
Reason for leaving:			
Company Name:			
Address:		Telephone:	
Date Started:	Starting Wage:	Starting Position:	
Date Ended:	Ending Wage:	Ending Position:	
Name of Supervisor:			
May we contact? $\Box$			
Responsibilities:			
Reason for leaving:			
Company Name:			
		Telephone:	
		Starting Position:	
Date Ended:	Ending Wage:	Ending Position:	
Name of Supervisor:			
May we contact?	Yes 🗖 No		
Responsibilities:			
Reason for leaving:			
Company Name:			
		Telephone:	
Date Started:	Starting Wage:	Starting Position:	
Date Ended:	Ending Wage:	Ending Position:	
Name of Supervisor:			

May we contact? $\square$ Yes $\square$	No			
Responsibilities:				
Reason for leaving:				
References				
List three personal reference	s, not related to you, who have kn	own you for more than one year.		
Name:	Phone:	Years Known:		
Address:				
		Years Known:		
Address:				
		Years Known:		
	Phone:			
I certify that the facts set forth best of my knowledge. I und shall be considered sufficient	th in this application for employmerstand that if I am employed, falst cause for dismissal. This compander educational and employment hi	nent are true and complete to the se statements on this application ny is hereby authorized to make		
I understand that employmer company can terminate the e and for any reason not prohil	nt at this company is "at will," wh mployment relationship at any time pited by statute. All employment is r, manager, or executive of this co	ich means that either I or this ne, with or without prior notice, is continued on that basis. I		
Signature		Date		