

SNODGRASS & SONS CONSTRUCTION

APPLICATION FOR EMPLOYMENT

Snodgrass & Sons Construction Co., Inc. is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability or any other characteristic protected by law.

PERSONAL INFORMATION:

Social Security Number: _____

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

EMPLOYMENT DESIRED

Position: _____ Salary desired: _____ Date Available: _____

If hired, can you provide documents required to establish your eligibility to work in the U.S.? Yes No

Are you 18 years of age or older? Yes No

How were you referred to Snodgrass & Sons Construction? _____

Have you ever been convicted of, or pled guilty or no contest to a crime other than a minor traffic violation? Yes No

If yes, please explain in detail include the date and State and the nature of the offense. This information will not necessarily disqualify you from employment but false or misleading information will. *Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.*

EDUCATION

High School - Last grade completed: _____ Name & Address: _____
Diploma? Yes No What year? : _____ Of School _____
GED? Yes No What year? : _____

College or Technical School Name & Address: _____
Course of Study: _____ Of School _____

Number of years completed: _____ Degree/Diploma/Certificate in?: _____

MILITARY EXPERIENCE:

Branch of Service: _____ From: _____ To: _____

Rank/Type of Service: _____ Training/Experience: _____

Job Related Skills: Circle the type of experience and write in how many years.

Commercial _____ Residential _____ Do you have your own tools? _____
Roofing _____ Metal Roofing _____ Metal Erection _____ Hardware _____ Rebar _____
Concrete _____ Form _____ Pour _____ Finishing _____ Mason _____
Framing _____ Wood _____ Metal _____ Form Carpentry _____

Read Blue Prints _____

Equipment Operator _____ -List Types: _____

RECORD OF EMPLOYMENT: List positions starting with most recent:

Employer: _____ Telephone: _____
Address: _____
Position Title: _____ Supervisor: _____
Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____
Duties: _____
Reason for Leaving: _____

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Address: _____
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Duties: _____
Reason for Leaving: _____

WORK-RELATED REFERENCES: (Do not include relatives)

	Name	Position	Years Known	Address/Phone Number
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

STATEMENT (Please read this statement carefully before signing this application):

I understand that employment with Snodgrass & Sons Construction (the Company) is at-will, meaning that I or the Company may terminate my employment at any time, or for any reason consistent with applicable state or federal law.

I authorize the Company to conduct a thorough background investigation of my work and personal history, and verify all data given on this application and during interviews. I hereby release the Company, and its representatives or agents, from any liability that might result from such an investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.

I understand that the Company requires the successful completion of a drug and/or alcohol test and background check as a condition of employment. I understand this is not an Employment Contract, and no promise or guarantee of employment has been made.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hire a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand this application will be active for a period of 180 days; after that time, if I wish to be considered for employment, I must submit a new application. I certify that all the statements in this completed application (and accompanying documents) are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

Signature of Applicant: _____ **Date Signed:** _____