

Employment Application

POSITION APPLIED FOR _____ DATE _____

Type of Employment Desired: Full Time Part Time Temporary Intern/Co-Op

Referral Source: Internet/Website Classified Ad Walk In Employee Referral
 Employment Agency/Recruiter _____
 Other _____

Note: Applications who may need help in completing this application or required reasonable accommodations should advise the interviewer immediate.

NAME: _____
 Last First Middle

ADDRESS: _____
 Street City State Zip Code

TELEPHONE NUMBERS: (____) _____ (____) _____ (____) _____
 Daytime Number Evening Number Other Number

EMAIL: _____

	Yes	No
Are you at least 18 years of age?	<input type="checkbox"/>	<input type="checkbox"/>
• If NO, can you furnish a work permit?	<input type="checkbox"/>	<input type="checkbox"/>
Upon employment, can you provide proof of U.S. citizenship or authorization to work in the U.S.?	<input type="checkbox"/>	<input type="checkbox"/>
Are you related to any active employees of the Company?	<input type="checkbox"/>	<input type="checkbox"/>
• If YES, Name _____		
Have you ever been discharged or forced/permitted to resign from a job?	<input type="checkbox"/>	<input type="checkbox"/>
• If YES, Please explain _____		

Have you ever been convicted of or pleaded guilty or nolo contendere (no contest) to any offense other than a minor traffic violation?	<input type="checkbox"/>	<input type="checkbox"/>
<i>(This includes misdemeanors. A criminal record will not necessarily bar you from employment; but a falsification, misrepresentation, or omission to state a material fact will.)</i>		
• If YES, or you are unsure, please explain _____		

I understand that if I am employed, I am obligated to report immediately to Company Management any event that would cause any of the answers indicated above to become inaccurate in any manner.

Employment History (for the past 10 years)

List your past employers, assignment/internships including any military experience in the U.S. Armed Forces, or volunteer activities for the last 10 years, starting with the most recent. All employers will be contacted to verify information provided. Explain any gaps in employment in the comment section. **Please do not merely attach your resume – all sections must be completed in full.**

FROM <i>(Month/Year)</i>	TO <i>(Month/Year)</i>	JOB TITLE
EMPLOYER		LOCATION (CITY & STATE)
IMMEDIATE SUPERVISOR & TITLE		TELEPHONE
REASON FOR LEAVING		MAY WE CONTACT YOU <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Name & Phone)</i>
ANNUAL BASE SALARY / HOURLY RATE \$	OTHER PAY (BONUS, COMMISSION, INCENTIVES) \$	TOTAL COMPENSATION \$
<i>Please summarize the nature of work performed.</i>		

FROM <i>(Month/Year)</i>	TO <i>(Month/Year)</i>	JOB TITLE
EMPLOYER		LOCATION (CITY & STATE)
IMMEDIATE SUPERVISOR & TITLE		TELEPHONE
REASON FOR LEAVING		MAY WE CONTACT YOU <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Name & Phone)</i>
ANNUAL BASE SALARY / HOURLY RATE \$	OTHER PAY (BONUS, COMMISSION, INCENTIVES) \$	TOTAL COMPENSATION \$
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FROM <i>(Month/Year)</i>	TO <i>(Month/Year)</i>	JOB TITLE
EMPLOYER		LOCATION (CITY & STATE)
IMMEDIATE SUPERVISOR & TITLE		TELEPHONE
REASON FOR LEAVING		MAY WE CONTACT YOU <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Name & Phone)</i>
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<i>Please summarize the nature of work performed.</i>		

FROM <i>(Month/Year)</i>	TO <i>(Month/Year)</i>	JOB TITLE
EMPLOYER		LOCATION (CITY & STATE)
IMMEDIATE SUPERVISOR & TITLE		TELEPHONE
REASON FOR LEAVING		MAY WE CONTACT YOU <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Name & Phone)</i>
ANNUAL BASE SALARY / HOURLY RATE \$	OTHER PAY (BONUS, COMMISSION, INCENTIVES) \$	TOTAL COMPENSATION \$
<i>Please summarize the nature of work performed.</i>		

Employment History (Continued)

FROM <i>(Month/Year)</i>	TO <i>(Month/Year)</i>	JOB TITLE
EMPLOYER		LOCATION (CITY & STATE)
IMMEDIATE SUPERVISOR & TITLE		TELEPHONE
REASON FOR LEAVING		MAY WE CONTACT YOU <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Name & Phone)</i>
ANNUAL BASE SALARY / HOURLY RATE \$	OTHER PAY (BONUS, COMMISSION, INCENTIVES) \$	TOTAL COMPENSATION \$
<i>Please summarize the nature of work performed.</i>		

FROM <i>(Month/Year)</i>	TO <i>(Month/Year)</i>	JOB TITLE
EMPLOYER		LOCATION (CITY & STATE)
IMMEDIATE SUPERVISOR & TITLE		TELEPHONE
REASON FOR LEAVING		MAY WE CONTACT YOU <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Name & Phone)</i>
ANNUAL BASE SALARY / HOURLY RATE \$	OTHER PAY (BONUS, COMMISSION, INCENTIVES) \$	TOTAL COMPENSATION \$
<i>Please summarize the nature of work performed.</i>		

Comments (explanation for gaps in employment, or any additional information you would like us to consider)

Educational Background

	School Name & Location <i>(City & State)</i>	# of Years Completed	Major	Type of Degree/Diploma Earned <i>(if any)</i>
High School				
College				
Other				

Skills Information

Computer Programs, Applications & Software:	Foreign Language(s)	Written Spoken	
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

List any Special accomplishments, certifications, publications, awards, etc.

Exclude any information that would reveal race, color, religion, sex, national origin, citizenship, age, disability, or any other similar protected status.

[EMPLOYMENT HISTORY]

[EDUCATION BACKGROUND]

[SKILLS]

Authorization & Release

I, _____, of my own free will, without promise of immunity, threats, or coercion, agree to allow Century 21 Construction Corp (the "Company"), or its designee, to conduct a background investigation which may include a conviction check, credit report, Department of Motor Vehicle report, and/or contact with one or more credit bureaus or similar agencies acting on behalf of the Company to conduct an investigation or produce a consumer report within the meaning of the Fair Credit Reporting Act, Public Law 91-508. I understand that I have the right to request, in writing, additional disclosures under the provisions of the Fair Credit Reporting Act.

I agree that the investigation results and its conclusions may be used by the Company as part of the employment process. I also understand that if employment is granted, the company may obtain further information through subsequent investigations by a consumer-reporting agency so as to update, renew, or extend my employment, unless a new authorization is required under state law. I hereby authorize the Company and/or its designee to contact any of my past employers or listed references, educational institutions or governmental agencies both orally and/or in writing, and to receive information from such individuals.

I have received a separate consumer notification that a consumer report may be requested and used for the purpose of evaluating me for employment, promotion, and/or retention as an employee. I understand that the results of this background investigation and the conclusions drawn from it may prove unfavorable to me.

In order to verify my identity for purposes of the background investigation, I voluntarily release the following information, including my date of birth, and fully understand that age is not a consideration in employment. This information is being requested solely for purposes of conducting a background investigation.

I authorize all persons who may have information relevant to this investigation to disclose to the Company or its designee, and I release all persons from liability due to such disclosure. I further authorize that a photocopy of this authorization be considered as valid as an original.

Date

Signature

[AUTHORIZATION]