



Application for Employment

Instructions

Please complete the entire application, sign and date the application where indicated.

Personal Information

NAME: _____

last first middle

MAILING ADDRESS: _____

city state zip
PHYSICAL ADDRESS: _____

number and street

city state zip
PHONE NUMBER: Daytime _____ Evening _____

AGE _____ DATE OF BIRTH _____

ARE YOU BONDABLE? _____ ARE YOU A U.S. CITIZEN? _____

POSITION APPLYING FOR: _____

DATE YOU CAN BEGIN WORK: _____

NUMBER OF HOURS PER WEEK YOU CAN WORK: _____

SALARY DESIRED: _____ HR/ DAY/ WK

ARE YOU PRESENTLY EMPLOYED: _____

IF YES, CAN WE CONTACT YOUR EMPLOYER: _____

Employment History

CURRENT OR MOST RECENT EMPLOYER: _____

ADDRESS/PHONE NUMBER: _____

SUPERVISOR'S NAME: _____

POSITION HELD: _____

FROM (date): _____ TO (date): _____

DUTIES AND RESPONSIBILITIES: _____

PREVIOUS EMPLOYER: _____

ADDRESS: _____

SUPERVISOR'S NAME AND PHONE NUMBER: _____

POSITION HELD: _____

FROM (date): _____ TO (date): _____

DUTIES AND/OR RESPONSIBILITIES: _____

PREVIOUS EMPLOYER: _____

ADDRESS: _____

SUPERVISOR'S NAME AND PHONE NUMBER: _____

POSITION HELD: _____

FROM (date): _____ TO (date): _____

DUTIES AND/OR RESPONSIBILITIES: _____

Education

NAME/LOCATION OF SCHOOL	YEARS COMPLETED	GRADUATE?
HIGH SCHOOL: _____		
COLLEGE: _____		
TRADE/BUSINESS: _____		
SPECIAL SKILLS APPLICABLE TO THE JOB FOR WHICH YOU ARE APPLYING: _____		

References

PLEASE GIVE THE NAME OF TWO PERSONS NOT RELATED TO YOU.

NAME: _____ PHONE: _____

ADDRESS: _____

BUSINESS: _____ YEARS KNOWN: _____

NAME: _____ PHONE: _____

ADDRESS: _____

BUSINESS: _____ YEARS KNOWN: _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Furthermore, I understand and agree that my employment is for no definite period.

Steppers Construction, Inc. is an Equal Opportunity Employer. It is our policy not to discriminate in employment, employment practices or services on the basis of race, religion, sex, age, sexual orientation, national origin, or handicapped status.

Signature of applicant

Date of application