

GENERAL APPLICATION FOR EMPLOYMENT



Position Applied For: _____ Date: _____

NOTE TO THE APPLICANT: This application is used to evaluate your qualifications for employment. Please answer all of the questions on your application accurately. If you fail to do so, you may lose employment opportunities or delay consideration of your employment. This application is not an employment contract. All qualified applicants will receive consideration for employment without regard to race, religion, color, national origin, disability, age, sex, or any other classification protected by federal, state, or local laws. Additional testing of job-related skills, as well as post-offer pre-employment physical (which will include a drug test) may be required.

PERSONAL INFORMATION

Name: _____ Social Security #: _____ - _____ - _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: (_____) _____ - _____ Alternate Telephone Number: (_____) _____ - _____

Are you at least 18 years of age? Yes No

(Child labor laws prohibit employment of individuals under the age of 18 in certain occupations considered to be hazardous)

Are you eligible for employment in the United States? Yes No

Do you speak, read, or write fluently a language other than English? Yes No

If YES, describe ability and list language(s): _____

Who referred you? _____

CRAFT TRAINING, EXPERIENCE & READINESS TO WORK

On what date would you be available for work? _____

Are you available to work: Full-time Part-time Shift Temporary

Are you on layoff and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Would you accept employment: Out-of-town Statewide Unaccompanied by family

If the position you are applying for involves the driving of a vehicle or equipment which requires a license

Do you have a valid drivers license? Yes No

If YES, please specify the type(s) of license(s): Operators CDL _____

License Number: _____

Expiration Date: _____

Have you had a motor vehicle accident or moving violation in the past three (3) years? Yes No

If YES, please explain: _____

What types and makes/models of construction equipment can you operate and/or repair?

List any craft training programs in which you have participated: _____



PREVIOUS EMPLOYMENT

Your training and employment experience will be used to determine whether you meet the entrance requirements for this position and to measure your knowledge, skills, and abilities in competing for this position. Therefore, please provide a full and accurate description of the responsibilities and achievements in your jobs and other pertinent life experiences. Include self-employment, volunteer experience, and any non-employment periods.

List your three most recent positions held starting with the most recent first:

From: _____	To: _____
Employer: _____	
Address: _____	
Phone Number: (_____) _____ - _____	
Positions Held/Duties: _____	
Supervisor: _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Starting Pay: _____	Ending Pay: _____
Reason for Leaving: _____	

From: _____	To: _____
Employer: _____	
Address: _____	
Phone Number: (_____) _____ - _____	
Positions Held/Duties: _____	
Supervisor: _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Starting Pay: _____	Ending Pay: _____
Reason for Leaving: _____	

From: _____	To: _____
Employer: _____	
Address: _____	
Phone Number: (_____) _____ - _____	
Positions Held/Duties: _____	
Supervisor: _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Starting Pay: _____	Ending Pay: _____
Reason for Leaving: _____	



REFERENCES

Include only individuals familiar with your work ability DO NOT include relatives.

Name	Address	Phone	Relationship	Yrs. Known

SPECIAL SKILLS & QUALIFICATIONS

Summarize special skills and qualifications acquired from employment of other experience:

Do you have your own craft tools, clothing and other equipment: Yes No

What is your highest level of education completed? _____

ACKNOWLEDGEMENT

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal, and I agree to hold my employer harmless in the event of my dismissal based thereon.

I authorize investigation of all statements contained herein and to background checks to give you all information concerning my previous employment and any pertinent information they may have, confidential or otherwise, and release all parties from liability for any damage that may result from furnishing same to you.

I realize that under certain provisions of Iowa law, pre-employment drug testing could be a condition of my employment. I also acknowledge that the employer may require drug testing at a subsequent time providing that proper advance notice of testing is provided.

I also recognize that I could be offered employment subject to appropriate medical examination and that such a report could nullify my ultimate employment by this employer. I agree to submit to a physical examination if required.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the method of payment of my wages and salary, be terminated at any time without prior notice. If employment is obtained under this application, I will comply with all the rules and policies of my employer."

Signature: _____ Date: _____