Ackerman Construction LLC

EMPLOYMENT APPLICATION

Application information

Full name:						Date:	
_	Last	First		M.I.			
Address:						Phone:	
	Street addres	S		Apt/Unit #			
_						Email:	
	City		State	Zip Code			
Date Available:	S.S. 1	no:				Desired salary:	\$
Position applied for	or:						
Are you a citizen c	of the United States?	Yes □	№ □				
If no, are you auth	norized to work in the U.S.?	Yes □	No □				
Do you have a vali	id driver's license?	Yes □	No □				
If no, do you have work?	reliable transportation to	Yes □	No □				
Have you ever bee	en convicted of a felony?	Yes □	No □	If yes, ex	plain?		
Education							
High school:			Address:				
From:	To:	Did yo	u graduate?	Yes □	No 🗆	Diploma:	
College:			Address:				
From:	To:	Did yo	u graduate?	Yes □	No 🗆	Degree:	
Other:			Address:				
From:	To:	Did yo	u graduate?	Yes □	No □	Degree:	
Previous Empl	oyment						
Company:				Phone	е:		
Job title:				From:			To:
Responsibilities:							
May we contact you	ur previous supervisor for a re	eference?		Yes □]	No □	

Company:	Phone:		
Job title:	From:		To:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes □	No □	
Company:	Phone:		
Job title:	From:		To:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes □	No □	
Craft Related Experience			
Please list the years of work experience you have in any of the following:			
Concrete (flatwork): Laborer (semi-skilled):	Post Fra	me Building:	
Disclaimer and signature			
I certify that the answers given by me in this employment application are tru not be liable, in any respect, if my employment is terminated because of mis application.	e, correct and constatements or pe	nplete. I agree tha rtinent omissions	at the company shall made by me in this
I agree, as a condition of my employment (should I be employed by the Comfurther agree to the search or examination of myself or personal property who business elsewhere. I also authorize any company, school, police or security regarding my employment, habits, ability, or any other characteristics whats me whether or not it is in their records. I hereby release all physicians, examiliability for any damages whatsoever for such testing, examining, or issuing a completion of this application does not mean a job opening exists and in no	hile on the compaing personnel, or othe oever, together winners, companies, this information. It	ny's premises or ver er person to give th any information schools, or other tis agreed and un	while conducting its any information In they have regarding In persons from Inderstood that
In the event of employment, I will comply with all company rules and regulat company's substance abuse policy. I am willing to work all assigned overtime company. Furthermore, since the company does not offer contracts of emplointended to create a contract between the company and me for either emplointended to that I have the right to terminate my employment at any time a	e or other special oyment, I understa oyment or the prov	work assignments and that nothing c vision of any comp	s as requested by the contained herein is pensation or benefits.
I hereby understand and acknowledge that any employment relationship wit that the Employee may resign at any time and the Employer may discharge without cause. It is further understood that this "At-Will" employment relation by verbal agreement unless such change is specifically acknowledged in wriunderstand that Ackerman Construction LLC retains the right to amend, mossole and absolute discretion.	Employee at any t nship may not be d ting by an authori:	ime, with or witho changed by any w zed Executive of t	ut notice, and with or ritten document or his Company. I also
I understand that if employed, I may be required to take a drug/alcohol test.	(initia	1)	
I understand that if employed, it is not acceptable to work or operate Compa alcohol or illegal substances(initial)	ny vehicles/equip	ment while under	the influence of
I understand that if employed, I must work all scheduled days/shift. In the exfrom attending work, I am required to communicate those issues with Mana; show-no call situations, may result in termination (initial)	vent of illness or o gement immediate	ther circumstance ely and failure to c	es that prevent me do so, such as no
Signature:]	Date:	