



**JOB APPLICATION**  
**APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

**PERSONAL INFORMATION**

**FULL NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
First Middle Last

**ADDRESS:** \_\_\_\_\_  
Street Address Apt/Suite

\_\_\_\_\_  
City State Zip Code

**E-MAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER (SSN):** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**DATE AVAILABLE FOR WORK:** \_\_\_\_\_ **DESIRED PAY:** \$ \_\_\_\_\_

**POSITION APPLIED FOR:** \_\_\_\_\_

**EMPLOYMENT DESIRED:**  FULL-TIME  PART-TIME  SEASONAL

**EMPLOYMENT ELIGIBILITY**

**ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S.?**  YES  NO

**HAVE YOU EVER WORKED FOR THIS EMPLOYER?**  YES  NO

**\*IF YES, WRITE THE START AND END DATES:** \_\_\_\_\_

**ARE YOU IN THE CARPENTER'S UNION?**  YES  NO

**\*IF YES, WHAT TERM?** \_\_\_\_\_  ACTIVE  INACTIVE

**HAVE YOU EVER BEEN CONVICTED OF A CRIME?**  YES  NO

**\*IF YES, PLEASE EXPLAIN:** \_\_\_\_\_

**DO YOU HAVE A DRIVER'S LICENSE?**  YES  NO **DRIVER'S LICENSE/ID #:** \_\_\_\_\_

**WHAT IS YOUR MEANS OF TRANSPORTATION TO WORK?** \_\_\_\_\_

**EDUCATION**

| TYPE OF SCHOOL | NAME OF SCHOOL | NUMBER OF YEARS COMPLETED | MAJOR/DEGREE |
|----------------|----------------|---------------------------|--------------|
| HIGH SCHOOL    |                |                           |              |
| COLLEGE        |                |                           |              |
| TRADE SCHOOL   |                |                           |              |
| OTHER SCHOOL   |                |                           |              |

**MILITARY SERVICE**

**ARE YOU A VETERAN?**  YES  NO

**BRANCH:** \_\_\_\_\_ **RANK AT DISCHARGE:** \_\_\_\_\_

**DATE ENTERED:** \_\_\_\_\_ **DISCHARGE DATE:** \_\_\_\_\_ **TYPE OF DISCHARGE:** \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

EMPLOYER 1: \_\_\_\_\_ MAY WE CONTACT THIS EMPLOYER?  YES  NO  
Company Name  
SUPERVISOR NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
STARTING PAY: \$ \_\_\_\_\_ ENDING PAY: \$ \_\_\_\_\_  
JOB TITLE: \_\_\_\_\_ EMPLOYMENT START & END DATES: \_\_\_\_\_ TO \_\_\_\_\_  
DUTIES PERFORMED: \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_

EMPLOYER 2: \_\_\_\_\_ MAY WE CONTACT THIS EMPLOYER?  YES  NO  
Company Name  
SUPERVISOR NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
STARTING PAY: \$ \_\_\_\_\_ ENDING PAY: \$ \_\_\_\_\_  
JOB TITLE: \_\_\_\_\_ EMPLOYMENT START & END DATES: \_\_\_\_\_ TO \_\_\_\_\_  
DUTIES PERFORMED: \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_

EMPLOYER 3: \_\_\_\_\_ MAY WE CONTACT THIS EMPLOYER?  YES  NO  
Company Name  
SUPERVISOR NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
STARTING PAY: \$ \_\_\_\_\_ ENDING PAY: \$ \_\_\_\_\_  
JOB TITLE: \_\_\_\_\_ EMPLOYMENT START & END DATES: \_\_\_\_\_ TO \_\_\_\_\_  
DUTIES PERFORMED: \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_

**PROFESSIONAL REFERENCES**

FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
COMPANY: \_\_\_\_\_ PHONE: \_\_\_\_\_  
FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
COMPANY: \_\_\_\_\_ PHONE: \_\_\_\_\_  
FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
COMPANY: \_\_\_\_\_ PHONE: \_\_\_\_\_

**QUALIFICATIONS**

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DID YOU COMPLETE THIS APPLICATION BY YOURSELF?**  YES  NO

IF NOT, WHO DID? \_\_\_\_\_

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**PLEASE READ CAREFULLY**

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**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Cheltenham Construction Services, Inc. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Cheltenham Construction Services, Inc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and Cheltenham Construction Services, Inc. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits. I understand and agree that, if hired, my employment will be for no definite period and may, regardless of the date of payment of wages, be terminated at any time without previous notice and with or without reason, at the will of either myself or the company.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.