

## **APPLICATION FOR EMPLOYMENT**

(Pre- Employment Questionnaire) (An Equal Opportunity Employer)

8511 State Route 703 Celina, OH 45822 Phone: 419.778.7024 Fax: 419.778.7064

PERSONAL INFORMATION	ON						
Last	First			SSN# Email			
Street Address		City	ST	Zip	Phone Number		
Are you entitled to work in the United States?			Are you 18 or older?  If yes, Date of Birth				
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years?			If yes, please explain:				
Military Service? Branch			Are you a veteran?				
What position are you applying for?			How did you hear about this position?				
Expected Hourly Rate	Expected	l Salary	Date Available				
Have you had any traffic violations/citations in the last 5 years?			If so, how many?				

EDUCATION				
	Name/Location	Last Year Complete	Degree	Major
High School			N/A	N/A
College/University				
Trade School				
Other				
List any applicable sp or proficiencies.	ecial skills, training			

		Curr	ent or Most Recent	Prior			Prior	
Employer								
Telephone								
Dates of Emplo	oyment							
Position/Job Ti	tle							
Pay								
Reason for Lea	aving							
May We Conta	ct	Y	ES OR NO	YES	OR NO	)	YES	S OR NO
		•					1	
REFERENCE	S							
	NAME:		ADDRESS:	BUSINE	SS:		PHONE	:
REFERENCE 1:								
REFERENCE 2:								
REFERENCE 3:								
IN CASE OF E	MERGENCY	:						
	NAME	<u> </u>	ADDRES	SS		PHONE	=	RELATIONSHIP

PRIOR WORK EXPERIENCE

EMERGENCY CONTACT:

SIGNATURE DATE

<sup>&</sup>quot;I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only when in writing and signed by the president, has the authority to enter any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing."



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ARMCORP CONSTRUCTION INC. IS AN EQUAL OPPURTUNITY EMPLOYER.

## **EQUAL EMPLOYMENT OPPURTUNITY INFORMATION**

The information supplied below is **strictly voluntary** and in no way will affect the processing of your employment status with this company. This information sheet will only be used for statistical purposes. Thank you for your cooperation.

SOCIAL SECURITY NUMBER
SEX
MALE
FEMALE
RACE
NON-MINORITY/WHITE:
AFRICAN AMERICAN:
HISPANIC/LATINO:
NATIVE AMERICAN OR ALASKAN NATIVE:
ASIAN/PACIFIC ISLANDERS:
DISABILITY
Are you an individual with a physical or mental impairment which substantially limits one or more of your major life activities?
YES NO
VETERAN STATUS
Are you a Veteran? YES NO
Disabled Veteran Desert Storm/Shield Veteran Desert Storm/Shield Veteran