

Application for Employment

DATE:			
APPLICANT INFORMATION			
First Name:	MI:	Last Name:	
Street Address:		Apt. #:	
City:		State:	Zip:
Home Phone:		Cell Phone:	
POSITION APPLYING FOR:			PAY RATE DESIRED:
DATE YOU CAN START:	HAVE YOU APPLIED TO THALLE BEFORE?		YES NO
IF YES, WHERE?		WHO DID YOU TALK TO?	
ARE YOU 18 YEARS OF AGE OR OLDER?		Yes	No
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES?		Yes	No
DID YOU SERVE IN THE U.S. ARMED FORCES?		Yes	No Rank?
CAN YOU PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING, EITHER WITH OR WITHOUT REASONABLE ACCOMODATION?			
		Yes	No
EMPLOYMENT HISTORY			
<u>Current Employer</u>			
Company:	Position:		
Address:			
Pay Rate:	Start date:	Still employed?	Yes No
<u>Previous Employers (list most recent first)</u>			
Company:	Position:		
Address:	Supervisor's Name:		
Pay Rate:	Start date:	End date:	
Reason for Leaving:			
Company:	Position:		
Address:	Supervisor's Name:		
Pay Rate:	Start date:	End date:	
Reason for Leaving:			
Company:	Position:		
Address:	Supervisor's Name:		
Pay Rate:	Start date:	End date:	
Reason for Leaving:			

Company:	Position:
Address:	Supervisor's Name:
Pay Rate:	Start date: End date:
Reason for Leaving:	

EDUCATION

College:	Location:	Degree(s) Received:
College:	Location:	Degree(s) Received:
Trade School:	Location:	Cert./License(s) Received:
High School:	Location	Did You Graduate? Yes No

SPECIAL SKILLS (such as heavy equipment you can operate and years of experience; other skills such as: pipe experience, foreman, concrete finishing, GPS, etc.)

LICENSES/CERTIFICATIONS (e.g., CDL, OSHA training, Notary Public, etc.)

REFERENCES

Name:	Title:
Company:	Relationship to You:
Years Known:	Telephone Number:
Name:	Title:
Company:	Relationship to You:
Years Known:	Telephone Number:
Name:	Title:
Company:	Relationship to You:
Years Known:	Telephone Number:

AUTHORIZATION

I understand that the information contained in the application is true and complete to the best of my knowledge. I understand that Thalle Construction Company, Incorporated reserves the right to discharge an employee for falsified statements on this application or during the interview process.

I authorize the investigation of all statements contained herein and the references and employers listed above concerning information about my previous employment, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I understand and agree that no representative of the Company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This authorization does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

Signature:	Date:
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