



APPLICATION FOR EMPLOYMENT

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or any other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions within this application. You may attach a resume, but all questions must be answered, except for the optional personal data on the last page.

PERSONAL DATA:

NAME (last, first, middle): _____
Street Address: _____ City: _____ State: _____ Zip: _____
Home Tel. : _____ Bus. Tel: _____ Cell: _____
Email: _____
Date available for employment: _____ Wage Desired: _____ HS Diploma? ___ Yes ___ No

POSITION INFORMATION

What position are you applying for: _____
(Check all applicable)
Hours: Full Time ___ Part Time ___ Days ___ Nights ___ Weekends ___ Status: ___ Reg. ___ Temp.
Are you authorized to work in the US on an unrestricted basis: ___ Yes ___ No
Have you ever been convicted of a felony (convictions do not automatically disqualify applicants) ___ Yes ___ No
If yes, explain:

Do you have a valid Driver's License? ___ Yes ___ No Driver's License Number: _____
If no, explain: _____
CDL Endorsement? ___ Yes ___ No

QUALIFICATIONS

Please list an education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs and military training.

	School Name	Degree	Address/City/State
School			
School			
Other			



Special Skills:

List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams etc.)

REFERENCES

Name	Address/City/State	Phone	Relationship

WORK HISTORY

Start with your present or most recent employment and work back.		
Job title:	Start Date:	End Date:
Company Name:	City:	Tel:
Supervisor:	State:	Zip:
Duties:		
Reason for leaving:	Starting Wage:	Ending Wage:

Job title:	Start Date:	End Date:
Company Name:	City:	Tel:
Supervisor:	State:	Zip:
Duties:		
Reason for leaving:	Starting Wage:	Ending Wage:

Job title:	Start Date:	End Date:
Company Name:	City:	Tel:
Supervisor:	State:	Zip:
Duties:		
Reason for leaving:	Starting Wage:	Ending Wage:



Job title:	Start Date:	End Date:
Company Name:	City:	Tel:
Supervisor:	State:	Zip:
Duties:		
Reason for leaving:	Starting Wage:	Ending Wage:

I certify that the information set forth in this Application for Employment is true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release Employer from any liability. The employer may contact any listed references on this application.

Applicant Signature

Date

NW Construction Inc. provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.



In order to comply with federal reporting requirements and to ensure NW Construction considers a diverse selection of candidates, NW Construction, Inc. reports the gender/race/veteran status of all applicants who voluntarily disclose such information. To ensure this information is not used in the selection process, this page is separated from the application upon submission, and no information disclosed below will be used in the selection process.

Providing the information below is optional and based on your self-identification. If you choose to participate, please answer all questions by filling in the blank. If you prefer not to disclose, please check the appropriate box.

Thank you for your cooperation.

VOLUNTARY DISCLOSURE OF PERSONAL DATA:

Gender: _____

Race: _____

Veteran: _____

Prefer Not to Disclose: _____

Desired Position: _____