

PRE-EMPLOYMENT APPLICATION

Our Company is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered. I also understand that I may be required to complete additional testing to fulfill the application process. The company requests three (3) days advance notice for any accommodations necessary to complete the application process. The company will make every reasonable effort to provide an effective accommodation, if feasible.

Client: PIONEER GENERAL CONTRACTOR	S. INC.	Date/_ /		
Name:	· · · · · · · · · · · · · · · · · · ·			
Present Address:				
Social Security Number:	•	-		
Are you employment authorized to work in the U.S. for any	•			
Have you ever been convicted of, plead guilty to, or served p including DWI? Yes No If yes, state the offense, location, date and disposition	robation for any crime (excluding			
NOTE: A conviction will not reasons which would li If yes, please explain:		overtime: yes no		
Would you be willing to relocate? ☐ Yes ☐ No				
Drivers License: State:	Type: _			
EMPLOYMENT DESIRED:				
What Category Would You Prefer:	ime			
Position:Date	You Can Start:	_ Salary Desired:		
Do you have any friends/relatives working for our company?	☐ Yes ☐ No Name o	of employee:		
Have you ever applied/worked for our company before? If your answer to the previous question is yes, please state when		worked:		
How did you learn of our company and/or position?				
Are you now or do you expect to be engaged in any other bus	siness or employment? Yes	□No		
Are there any days or hours you would be unable or unwilling If yes, please specify those days or hours you would be				
Are there any reasons why you would be unable to perform the Yes No If yes, please state reasons:	ne tasks involved in the position yo	ou are applying for?		
Do you have adequate transportation to ta Comment:	ke you to and from work	?YesNo		

rev 8/28/98

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

. Employer		Dates En		Work Performed/Responsibilities
A 1 1		From	То	
Address				
Telephone Numbe	er(s)			
relephone Number(3)		Hourly Ra	te/Salary	
Job Title	Supervisor	Starting	Final	
Danasa fan Laavin				
Reason for Leavin	lg			
May we contact th	is employer?			
Employer		Dates En		Work Performed/Responsibilities
Address		From	То	
Telephone Numbe	.r/o\			
i elephone Numbe	:i(3 <i>)</i>	Hourly Ra	te/Salarv	
Job Title	Supervisor	Starting	Final	
Reason for Leavin	ig			
. Employer		Dates En	ployed	Work Performed/Responsibilities
		From	То	_
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relephone Humber(3)	Hourly Ra	te/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leavin				
. Employer		Dates En	ployed	Work Performed/Responsibilities
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Job Title	Supervisor	Starting	Final	
Reason for Leavir	ng			
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	If you need additional spac	e, piease continue	on a separ	ate sneet of paper.
Are you physically	yor otherwiseunable to	perform the dut	ies of the i	ob for which you
	YesNo			,
are applying?				
are applying? If Yes, please des	cribe:			

EDUCATION:					
Name, Address and Location	Courses Studied	Courses Studied			
High School					
College					
		·			
Trade School					
SKILLS: Please detail your skills which qualify you for the	he position for which you have applied:				
more space, please continue on a sep	arate sneet.				
Give three personal references, not relative	- ·				
NAME	ADDRESS	PHONE			
	true and correct without any consequential omissions of any kind vincorrect statements made on this application form or during any in				
qualifications and I give my full and complete consent	pany or individual it deems appropriate to investigate my emplo to their revealing any and all information they wish as a result of the gainst those individuals for defamation, invasion of privacy or any	his investigation. In addition			
given pursuant to company policy, are a condition of co termination. I further understand that nobody in the C definite period of time without the express written cons	les and regulations of the company. I understand that the taking of ontinued employment and refusal to take such tests when asked will company is authorized to enter into any written or verbal employment of the President of the Company. I also understand that my empe for any reason or no reason at all, with or without prior notice.	be grounds for my immediate ent contracts with me for any			
Signature					
NOTE: This application will remain active for six	xty days, after which applicants must reapply for available	positions.			