

**All statements made by applicants for employment on
this application will be checked for accuracy.**

AN EQUAL OPPORTUNITY EMPLOYER

(PLEASE PRINT)

Social Security Number _____ Date of Application _____

Name _____
(Last) (First) (Middle)

Address _____
(Street) (City) (State) (Zip Code)

Telephone (_____) _____
Area Code

Previous Address _____
(Street) (City) (State) (Zip Code)

Type of Employment Desired: Full Time ____ Part Time ____ Temporary ____

Salary/Wage Expected _____

Are you over 18 years of age? Yes ____ No ____

Do you have a legal right to work in the U.S.? Yes ____ No ____

Are you able to work overtime as and when required? Yes ____ No ____

If not, explain _____

Have you ever been discharged or requested to resign from a position? Yes ____ No ____

If Yes, explain _____

Are you employed now? Yes ____ No ____

If Yes, why do you desire to make a change? _____

Do you have experience in: Roadwork ? ____ Sewer Work? ____

Have you ever been convicted of a felony? Yes ____ No ____ If Yes, date & explain _____

Referral Source: Advertisement ____ Friend ____ Relative ____ Walk in ____ Other _____

Do you have any relatives working for Eutaw Construction? Yes ____ No ____

If Yes, who? _____

Have you ever worked for Eutaw Construction before? Yes ____ No ____

Have you applied for a job with us before? Yes ____ No ____ If Yes, when _____

EDUCATION

School Name & Location	Elementary					High School				College/University				Graduate/Professional			
	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Years Completed: (circle)																	
Other Training (Vocational or Trade School)																	

In order to permit a check of your work and education records, should we be made aware of any change of name or assumed name that you previously used? Yes _____ No _____

If Yes, identify name(s) and relevant dates _____

REFERENCES

Please list former supervisors/associates who are acquainted with your professional or work qualifications:

Name	1	2	3
Company Address & Business Phone			
Relationship			

WORK EXPERIENCE (Current or most recent first)

Employer	Ph.# ()	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate Salary		
Supervisor		Starting	Final	
Reason for Leaving				
Employer	Ph.# ()	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate Salary		
Supervisor		Starting	Final	
Reason for Leaving				
Employer	Ph.# ()	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate Salary		
Supervisor		Starting	Final	
Reason for Leaving				

Are there any additional comments you would care to make regarding your experience, special skills or qualifications?

EUTAW CONSTRUCTION COMPANY, INC.

Upon hiring please fill out the following completely:

Drivers License# _____ (If you might be operating any company vehicles)

In case of emergency, notify (Name) _____ (Phone) _____

Family status: Single _____ Married _____ Number of dependents _____

TO BE SIGNED DURING PERSONAL INTERVIEW AS A CONDITION OF EMPLOYMENT

APPLICANTS UNDERSTANDING AND CERTIFICATION

I hereby give Eutaw Construction Company, Inc. the right to make a thorough investigation of my past employment, education, and activities and I release from all liability all persons, companies, schools, and corporations supplying such information. I indemnify Eutaw Construction Company, Inc. against any liability which might result from making such investigations. I agree that Eutaw Construction Company, Inc. may obtain a consumer report or other information regarding me and may consult others for any information they may deem necessary in considering my employment. I understand that any false answers or statements or implications made by me in this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

Additionally, I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Eutaw Construction Company, Inc. and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that no such promises or guarantee is binding upon Eutaw Construction Company, Inc. unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and Eutaw Construction Company, Inc. retains a similar right, with or without cause.

SIGNED BY _____ DATE _____

EUTAW CONSTRUCTION COMPANY, INC.

This form is to be filled out voluntarily by applicants. This information is for our records and will not be used in a discriminatory manner. This data is for periodic government reporting and will be kept in a confidential file separate from the application for employment.

Name _____ Telephone _____
First Middle Last

Address _____
No. Street City State Zip

Date of Birth _____ S.S.# _____ Driver's License # _____

Position Applied For: _____

Referral Source: Advertisement _____ Friend _____ Relative _____ Walk in _____ Other _____

AFFIRMATIVE ACTION SURVEY

Government agencies require periodic reports on the sex and ethnicity of applicants. This data is for analysis and affirmative action only. Submission of this information is voluntary.

Sex

Male _____ Female _____

Family Status

Single _____ Married _____

Race/Ethnic Group

White _____ Black _____ Hispanic _____ American Indian / Alaskan Native _____ Asian / Pacific Islander _____

Special employment notice to Special Disabled Veterans, Vietnam Era Veterans, and other Protected Veterans.

If you are a special disabled veteran, veteran of the Vietnam Era, or any other protected veteran, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you to perform the job in a proper and safe manner. This information is voluntary, will remain confidential, and will not jeopardize or adversely affect any consideration you may receive for employment. This information also helps us to complete a required federal report on veteran's employment in our workplace.

If you wish to be identified, please indicate below:

Special Disabled Veteran _____ Vietnam Era Veteran _____ Other Protected Veteran _____