

APPLICATION FOR EMPLOYMENT

Diversified Civil Contractors, LLC is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

PERSONAL	:					
Name:	Last			First		Middle
Address:	Number & Stre	 et	City	Sta	te	Zip Code
Position Sou	ght:			Full Time		Part Time
Date Availab	ole:			Sala	ry Desired	d:
Phone Numb	per:			Email Addr	ess:	
Social Secur	ity Number		_			
Are you over	r 18 years old?	Y	esN	No		
	lly eligible for emp nployment, you wil					No oility.)
EDUCATIO Please indica	N: ate education or train	ning which y	ou have receive	ed/completed.		
High School	l: No. of years com	pleted:	1	2	3	4
Diploma:	Yes	No		Yes Yes		
College and	/or Vocational Sch No. of years comp	ool:		2	3	4
School(s)				City/State		
Major:		Degrees	Earned			

PROFESSIONAL LICENSE OR MEMBERSHIPS: Driver's License DL Number CDL Yes No If Yes, what Clas CPR/First Aid Certified Yes No OSHA 10 Certified Yes No Other Professional Licenses or Certificates:	City/State					
PROFESSIONAL LICENSE OR MEMBERSHIPS: Driver's License DL Number CDL Yes No If Yes, what Clas CPR/First Aid Certified Yes No OSHA 10 Certified Yes No Other Professional Licenses or Certificates:						
Driver's License DL Number CDL Yes No If Yes, what Clas CPR/First Aid Certified Yes No OSHA 10 Certified Yes No Other Professional Licenses or Certificates: SKILLS:	Course: Degree or Certificate Earned					
Driver's License DL Number CDL Yes No If Yes, what Clas CPR/First Aid Certified Yes No OSHA 10 Certified Yes No Other Professional Licenses or Certificates: SKILLS:						
DL Number No If Yes, what Class CPR/First Aid Certified Yes No OSHA 10 Certified Yes No Other Professional Licenses or Certificates: SKILLS:						
CDLYesNo	<u></u>					
OSHA 10 Certified Yes No Other Professional Licenses or Certificates: SKILLS:	State Expiration s?					
Other Professional Licenses or Certificates: SKILLS:						
SKILLS:						
Office: Typing: WPM Please indicate the software you are familiar with:						
Word Excel PowerPoint	Access					
QuickBooks Outlook						
Other Software Skills:						
Have you ever been employed in any facility of Diversified C YesNo	Evil Contractors, LLC?					
If so, please sate facility name and location and dates of employee	oyment:					
RECORD OF CONVICTION:						
During the last ten years, have you ever been convicted of a ca	rime other than minor traffic offense?					
YesNo						
Yes No If yes, explain: (A conviction will not necessarily automatically disqualify you for employn						

conviction, seriousness and nature of the crime and rehabilitation will be considered.)

lay w	e contact you p	resent	employer:	Yes	No	
•						
any e	employment wa	s unde	r a different name	e, indicate na	ne:	
eviou	us Employment:	:				
•	Employe	r Nam	ie		Employer Address	
					to	
]	Phone Number		Posit	ion Held	Dates of employn	nent
	C -1		<u> </u>		Duties	
	Salary	DÆ	Supervisor		Duties	
	FT	PT	Reason for leavi	ng:		
	Employe	r Nam	ie		Employer Address	
					to	
	Phone Number		Posit	ion Held	Dates of employn	nent
	Salary		Supervisor		Duties	
	FT	PT	Reason for leavi	ng:		
•	Employer Name			Employer Address		
					to	
	Phone Number		Posit	ion Held	Dates of employn	nent
			-			
	Salary		Supervisor		Duties	
	FT	PT	Reason for leavi	ng:		
•	Employe	r Nam	<u> </u>		Employer Address	
	1 7				to	
]	Phone Number		Posit	ion Held	Dates of employn	nent
					•	
	Salary		Supervisor		Duties	
	FT 1	PT	Reason for leavi	ng:		

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.						
Explain any gap in	work history:					
Have you ever been If Yes, explain:	discharged or asked to resign from		No			
REFERENCES: Professional:	Phone Email					
	Address Phone Email					
	Address					
Personal:	Address					
	Name Address Phone Email					
	Name Address Phone Email					

This application for employment is good for 30 days only.

Consideration for employment after 30 days requires a new application.

APPLICANT'S CERTIFICATION AND AGREEMENT

I, hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Diversified Civil Contractors, LLC to verify their accuracy and to obtain refence information on my work performance I hereby release Diversified Civil Contractors, LLC from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules, and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant:	Date:	