

Application for Employment

PERSONAL INFORMATION						
DATE	SOCIAL SE	CURITY NUMBER	REFFERED BY			
LAST NAME	FIRST NAME	MIDDLE NAME	PREFERRED NA	ME OR NICKNAME		
STREET ADDRESS		CITY	STATE	ZIP		
HOME PHONE	CELL PHONE	FACSIMILE (FAX)	E-MAIL			
POSITION/S APPLYING FOR						
If offered employment, can you provide satisfactory evidence of your identity and legal ability to work in the United States?						
EDUCATION						
HIGH SCHOOL						
STREET ADDRESS		CITY	STATE	ZIP		
DEGREES / DIPLOMA						
COLLEGE / UNIVERSITY						
STREET ADDRESS		CITY	STATE	ZIP		
DEGREES / DIPLOMA						
TRADE / TECHNICAL TRAIN	ING					
STREET ADDRESS		CITY	STATE	ZIP		
DEGREES / DIPLOMA						
EMPLOYMENT HISTORY(Begin with the most recent employer. Attach additional sheets if needed.) If this is your current employer, may we contact this employer regarding your application? Yes No						
EMPLOYER	STREET AD		STATE	ZIP		
PHONE	START DATE		SINNING SALARY	ENDING SALARY		
YOUR TITLE	DUTIE	DUTIES \$		\$		
MANAGER'S NAME / TITLE	REASO	ON FOR LEAVING				
EMPLOYER	STREET AD	DDRESS CITY	STATE	ZIP		
PHONE	START DATE	END DATE BEG	SINNING SALARY	ENDING SALARY \$		
YOUR TITLE	DUTIE	*		*		
MANAGER'S NAME / TITLE		REASON FOR LEAVING				
EMPLOYER	STREET AD	DDRESS CITY	STATE	ZIP		
PHONE	START DATE	END DATE BEG	GINNING SALARY	ENDING SALARY \$		
YOUR TITLE	DUTIE			*		
MANAGER'S NAME / TITLE		REASON FOR LEAVING				



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ADDITIONAL INFORMATION						
Have you been convicted of a felony for which the record has not been judicially expunged or sealed? A conviction record will not constitute an automatic bar to employment.						
If yes, state the charge, date, court and disposition:						
Do you have a friend or relative currently employed by Credo Construction, Inc.? If yes, please identify: NO						
Are you able to perform the essential functions of the position for which you are applying with or without reasonable accommodation?						
If no, please describe what type(s) of reasonable accommodations you need:						
						
REFERENCES List three professional references who are familiar with the quality of your work, have worked directly with you, and have known you at least two years.						
REFERENCE NAME	RELATIONSHIP					
TYPE OF BUSINESS; POSITION	YEARS KNOWN					
WORK PHONE	HOME PHONE					
STREET ADDRESS CIT	TY STATI	E ZIP				
REFERENCE NAME	RELATIONSHIP					
TYPE OF BUSINESS; POSITION	YEARS KNOWN					
WORK PHONE	HOME PHONE					
STREET ADDRESS CIT	TY STATI	E ZIP				
REFERENCE NAME	RELATIONSHIP					
TYPE OF BUSINESS; POSITION	YEARS KNOWN					
WORK PHONE	HOME PHONE					
STREET ADDRESS CIT	TY STATI	E ZIP				
EMPLOYMENT AT WILL STATEMENT						
I understand and agree that this application does not constitute an employment contract of any kind. I further understand that if I am offered employment by the company, the employment offered will be at will employment, meaning that the employment relationship may be terminated by me or the company at any time, with or without cause, with or without notice. I also understand that no employee or representative of the company, other than the president 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 that of the at will employment.						
APPLICANT'S SIGNATURE:		DATE:				
BACKGROUND INVESTIGATION RELEASE						
I certify that the information I have provided in this application is true and correct to the best of my knowledge and I agree that any of the statements I have made, may be investigated by the company. In addition, I authorize the reference listed in this application to provide the company with any and all information concerning my previous employment and any other pertinent information that they might have about me. Further, I release all parties and persons from any and all liability and damages that might result from furnishing information to the company as well as from the use or disclosure of such information by the company or any of its agents, employees or representatives. I also understand and agree that any misrepresentation or omission of facts, or falsification of information on this application may result in my failure to receive an offer or employment, or the termination of my employment if I am hired. Birth date required for processing. BIRTH DATE: /						
APPLICANT'S SIGNATURE:		DATE:				
APPLICANT'S SIGNATURE:	DATE:					
Credo Construction, Inc. is an equal opportunity employer. The company does not discriminate on the basis of race, color, religion, sex, national origin, sexual preference, age, gender identity, disability, or any other characteristic protected by applicable state or federal law.						