

Rev: 2020



Application for Employment

Siteworks LLC is a Proud Equal Opportunity / Affirmative Action Employer
This organization participates in E-Verify

Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Please use blank paper if you do not have enough room on this application. PLEASE PRINT except for the signature on page 2 of this application. In reading and answering the following questions, be aware that none of the questions are intended to imply legal preferences or discrimination based upon non-job-related information

Job applied for: _____ Today's Date: _____

What type of employment are you seeking? Part Time Full Time Temporary

When can you start? _____

Last Name	First Name	Middle Name	Phone Number
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Present Street Address	City	State	Zip Code
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If you are hired can you furnish proof of age? Yes No

Have you ever been convicted of a crime? Yes No

If you are hired can you furnish proof you are eligible to work in the USA? Yes No

Do you have a valid driver's license? Yes No Driver's License # _____
Class of License: _____

Do you have your own transportation to and from work each day? Yes No

EMERGENCY CONTACT #1

Last Name	First Name	Phone Number	Relationship to Employee
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EMERGENCY CONTACT #2

Last Name	First Name	Phone Number	Relationship to Employee
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List any skills or training you've had related to the job you are applying?

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What machines or equipment can you operate that are related to the job you are applying for?

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Name of Employer	Address	City, State, Zip Code
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Supervisor	Phone Number	Reason for Leaving
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Job Title /Duties	Rate of Pay
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Name of Employer	Address	City, State, Zip Code
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Supervisor	Phone Number	Reason for Leaving
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Job Title /Duties	Rate of Pay
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Can we contact your present employer or references? Yes No

Please read each statement carefully before signing

I certify that all of the information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, (except where previously noted), past employers and organizations to provide relevant and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that if I am extended an offer of employment it may be conditioned upon passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying for.

I understand that I may be required to successfully pass a drug screening examination. I hereby consent to a pre and / or post-employment drug screen as a condition of my employment.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature, consent to these statements.

Signature _____ Print Name: _____ Date: _____