

**EQUAL OPPORTUNITY EMPLOYER.** This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

— PLEASE TYPE OR PRINT IN INK —

Name		Today's Date	
Address		How did you hear about us?	
City		State	Zip Code
Home Telephone ( )	Cellular Telephone ( )	E-mail Address	
Position for which you are applying			
Check the following options you would consider <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		If part time, specify hours or days	
Do you have any commitments to another employer that might affect your employment with us?		Date available for work	

**EDUCATION & TRAINING**

	SCHOOL NAME	CITY AND STATE	DEGREE/DIPLOMA MAJOR COURSE OF STUDY	DEGREE RECEIVED?
High School/GED				<input type="checkbox"/> Yes <input type="checkbox"/> No
College				<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade School				<input type="checkbox"/> Yes <input type="checkbox"/> No

List any other education, training, special skills or certificates/licenses that you possess related to the job.

Professional License/ Certification #	Professional License/ Certification Type	Issuing Agency	State Issued	Expiration Date

List any machines, equipment or software programs on which you are qualified and experienced in operating.

List any languages that you speak fluently: \_\_\_\_\_ Read/write: \_\_\_\_\_

Do you have a valid driver's license in this state?  Yes    No

Military Experience?  Yes    No   If Yes, what branch? \_\_\_\_\_ Rank at separation \_\_\_\_\_

**GENERAL INFORMATION**

Can you, after employment, submit verification of your legal right to work in the United States?  Yes    No

If you are under 18, can you provide proof of your eligibility to work?  Yes    No

Were you previously employed by M Bar C Construction, Inc.? If Yes, give dates \_\_\_\_\_  Yes    No

List any relatives working for M Bar C Construction, Inc.:

Can you perform the essential functions of the job?  Yes    No

Do you require any accommodation to perform the essential functions of the job?  
If Yes, explain: \_\_\_\_\_  Yes    No

## EMPLOYMENT HISTORY

List below all present and past employers over the past ten years, starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

<b>MOST RECENT JOB HELD</b>	Name of Employer		Type of Business	
	Address		City	State
				Zip Code
			Title	
	Name and Title of Supervisor		Telephone Number ( )	
	E-mail Address of Supervisor		May We Contact?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Employment				
<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time				
Brief Description of Duties				
Reason for Leaving				

<b>PREVIOUS EMPLOYMENT</b>	Name of Employer		Type of Business	
	Address		City	State
				Zip Code
	Dates Employed (from-to)		Title	
	Name and Title of Supervisor		Telephone Number ( )	
	May We Contact?		Type of Employment	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	
Brief Description of Duties				
Reason for Leaving				

<b>PREVIOUS EMPLOYMENT</b>	Name of Employer		Type of Business	
	Address		City	State
				Zip Code
	Dates Employed (from-to)		Title	
	Name and Title of Supervisor		Telephone Number ( )	
	May We Contact?		Type of Employment	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	
Brief Description of Duties				
Reason for Leaving				

<b>PREVIOUS EMPLOYMENT</b>	Name of Employer		Type of Business	
	Address		City	State
				Zip Code
	Dates Employed (from-to)		Title	
	Name and Title of Supervisor		Telephone Number ( )	
	May We Contact?		Type of Employment	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	
Brief Description of Duties				
Reason for Leaving				

**BUSINESS REFERENCES**

(List three individuals, in addition to listed employment references, known to you for at least three years. Be sure to provide accurate information.)

NAME	OCCUPATION / ASSOCIATION	TELEPHONE / E-MAIL
1.		
2.		
3.		

**Person to be notified in case of emergency: (Optional on Application)**

Name	Telephone (     )
Address	

**ADDITIONAL INFORMATION**

Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, training completed, articles/books published, activities, honors received, etc. (You may omit all information that would indicate age, sex, sexual orientation, race, religion, color, national origin, or disability.)

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**AGREEMENT (Please read the following statement carefully and place your initials next to each paragraph, then sign your full signature below.)**

- \_\_\_\_\_ I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.
- \_\_\_\_\_ I authorize all persons listed above (and on the accompanying resume, if any) to give M Bar C Construction, Inc. any and all information concerning my previous employment and education and any pertinent information they may have, personal or otherwise, and release all parties, such persons and M Bar C Construction, Inc., from liability for any damage that may result from furnishing same to M Bar C Construction, Inc..
- \_\_\_\_\_ I understand that M Bar C Construction, Inc. provides workers' compensation insurance coverage for its employees. In the event of an injury in the workplace, I agree that my sole remedy lies in coverage under M Bar C Construction, Inc.'s workers' compensation insurance policy.
- \_\_\_\_\_ If employed by M Bar C Construction, Inc., I agree to abide by the policies and procedures of M Bar C Construction, Inc. which includes M Bar C Construction, Inc.'s Anti-Harassment Policy.
- \_\_\_\_\_ I further understand that my employment can be terminated, with or without cause or notice, at any time, at the discretion of M Bar C Construction, Inc., or myself. I further understand that no manager or representative of M Bar C Construction, Inc. other than the president of M Bar C Construction, Inc. has any authority to enter into any agreement, oral or written, on behalf of M Bar C Construction, Inc. for a term of employment or to make any assurance or promise of continued employment.
- \_\_\_\_\_ I understand that M Bar C Construction, Inc. may obtain a consumer and/or investigative consumer report for employment purposes that may include information regarding prior employment, work experience and performance, reasons for employment termination, and information as to character, general reputation, personal characteristics, or mode of living. The report may also contain a records check of driving, criminal, credit, education, degrees, professional licenses and/or certification records depending on the position. By signing this application, I authorize the procurement of a consumer and/or investigative consumer report by M Bar C Construction, Inc. as part of the pre-employment background investigation and if hired, at any time during my employment. California Applicants:
- \_\_\_\_\_ I further understand that M Bar C Construction, Inc. may obtain Public Records about me as part of an internal background investigation and that I may waive my right to receive a copy of such Public Records by checking this box:
- \_\_\_\_\_ I understand and agree that I may be required to take a drug and alcohol screening test. I hereby give my voluntary consent for a blood and/or urine sample to be collected from me and submitted for testing. I also consent to the release of the test result to M Bar C Construction, Inc. for its use. I understand that any positive drug or alcohol result may preclude my employment.
- \_\_\_\_\_ I understand that M Bar C Construction's acceptance of this application form does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that the Company is under no obligation to hire me as a result of accepting this completed application.

Signature	Date
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