

Application for Employment

As an Equal Opportunity Employer, it is our policy to attract and retain the best qualified people available without regard to race, color, religion, national origin, gender, sexual orientation, age, disability or status as a special disabled veteran, Vietnam Era Veteran or other qualifying veteran.

We promote a drug-free work environment and require pre-employment drug screening.

PLEASE PRINT

Position(s) applied for _____ Date of application _____ / _____ / _____

Referral Source Advertisement Employee Walk-in
 Internet Agency Other Name of Source (if applicable) _____

Name _____
Last First Middle

Address _____
Street City State Zip Code

Social Security Number _____ - _____ - _____

Telephone Number : Home (____) _____ Work (____) _____ Mobile (____) _____

May we contact you at work?..... Yes No

Are you legally eligible for employment in this country? Yes No
(Proof of U.S. Citizenship or residence status will be required upon employment.)

Date available for work..... _____ / _____ / _____

Type of employment desired Full-time Part-time Temporary

Will you work overtime if required? Yes No

Will you work weekends if required?..... Yes No

Will you travel if job requires it?..... Yes No

Have you been convicted of a felony in the last seven (7) years? Yes No
(Such conviction may be relevant if job related.)

If yes, please explain _____

Driver's license number _____ State _____

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Employment History

List your last three (3) employers, (all information must be complete). Explain any gaps in employment in comments section below.

Employer	Telephone ()	Dates Employed		Summarize the nature of the work performed and job responsibilities:
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for Leaving		Hourly Rate/Salary		
		Final		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	

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		Final		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	

Comments (including explanation of any gaps in employment)

Skills and Qualifications

Licenses/certifications held: _____

Type of apprenticeship served: _____ When served: _____

Types of machines operated: _____

List other shop/production skills: _____

Computer skills: Hardware _____ Software _____

Language experience/skills: _____

List other skills that may qualify you as being able to perform job related functions for the position you are applying for:

Educational Background

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned.

A. School	B. Years Completed	C. Degree/Diploma

Business References

List name and telephone number of three business/work references who are *not* related to you.

Name	Telephone	Years Known
	Area Code ()	
	Area Code ()	
	Area Code ()	

List professional, trade, business, or civic associations and any offices held. (Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or other protected status.)

Organization	Offices Held

List special accomplishments, publications, awards (exclude information which would reveal sex, race, religion, national origin, age, color, disability or other protected status.) _____

Maloney & Bell General Construction, Inc. is an Equal Opportunity Employer. We do not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

I understand that just as I am free to resign at any time, Maloney & Bell General Construction, Inc. reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of Maloney & Bell General Construction, Inc. has the authority to make any assurances to the contrary.

Signature _____

Date _____

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Release and Authorization

RELEASE AND AUTHORIZATION

I voluntarily and knowingly authorize for employment purposes only, any present or past employer or supervisor, university or institution of learning, administrator, law enforcement agency, state agency, federal agency, private business, military branch or the National Personnel Records Center, personal reference, and/or other persons, to give records or information they may have concerning my criminal history, motor vehicle history, earnings history and employment records, worker's compensation claims, general reputation, or character requested by Maloney & Bell General Construction, Inc. and/or its agents or representatives. I voluntarily and knowingly unconditionally release any named or unnamed informant from any and all liability resulting from the furnishing of this information.

SIGNATURE

DATE

FULL NAME *(Type or Print Legibly)*

LIST ANY OTHER NAMES UNDER WHICH YOU HAVE WORKED OR RECEIVED A DEGREE

STREET ADDRESS

CITY, STATE, ZIP

SOCIAL SECURITY NUMBER

DRIVER'S LICENSE NUMBER

STATE OF ISSUE

NAME EXACTLY AS IT APPEARS ON DRIVERS LICENSE

POSITION FOR WHICH YOU ARE APPLYING

MAY WE CONTACT YOUR CURRENT EMPLOYER? (box below)

YES NO NOT APPLICABLE

DMV AUTHORIZATION

I am aware that motor vehicle reports may be obtained as part of Maloney & Bell General Construction, Inc. evaluation of my job application and/or employment. The reports may be produced by Edgewood Partners Insurance Center or its insurance company representative(s) and may include personal information obtained from state motor vehicle departments, my driving record, an assessment of my insurability for the insurance program.

By signing this letter, I hereby provide my authorization for Maloney & Bell General Construction, Inc., and their insurance company representative(s) to procure such information and reports, as well as additional reports about me from time-to-time as deemed appropriate, to evaluate my insurability or for other permissible purposes.

Sincerely,

Signature of Applicant/Employee

Name as it appears on Drivers License

Driver's License Number/State of Issuance

Date of Birth

Date

ALCOHOLIC BEVERAGES ACKNOWLEDGEMENT

In order to maintain a safe and productive work environment, it is company policy that absolutely no alcoholic beverages of any kind are to be consumed, or purchased, during or preceding work hours, including lunch breaks.

This applies to all offices and field personnel, and includes customer entertainment and personal lunch activities where you return to work or have contact and communication with personnel of other businesses.

Violation of this policy may result in disciplinary action, up to and including termination.

Print Name

Date

Signature

VOLUNTARY SELF-IDENTIFICATION

(2007 EEO-1 changes, updated information needed for EEO-1 reporting purposes only)

The Equal Employment Opportunity Commission (EEOC) requires organizations with 100 or more employees to complete an EEO-1 report each year. The EEOC has recently announced several changes to the job categories and rearranged its race and ethnicity groupings. Therefore, we are asking employees to complete a new voluntary self-identification sheet below so that we can properly update our records according to these new report requirements.

Completion of this data is voluntary and will not affect your opportunity for employment or terms or conditions of employment. This form will be used for EEO-1 reporting purposes only and will be kept separate from all other personnel records only accessed by Human Resources Department. Please return completed forms to the Human Resources Department.

Name: _____

Job Title: _____

GENDER: (Please check one of the options below)

_____ Male

_____ Female

RACE/ETHNICITY: (Please check one of the descriptions below corresponding to the ethnic group with which you identify.)

___ **Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

___ **White (Not Hispanic or Latino)** – A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

___ **Black or African American (Not Hispanic or Latino)** – A person having origins in any of the black racial groups of Africa.

___ **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** – A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.

___ **Asian (Not Hispanic or Latino)** – A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

___ **American Indian or Alaska Native (Not Hispanic or Latino)** – A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.

___ **Two or More Races (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.

Date completed: _____

PLEASE RETURN FORM TO HUMAN RESOURCES DEPARTMENT.

Thank you for your participation.