



Application for Employment

Position(s) applied for _____ Date _____

Name: _____
 First Middle Last

Address _____
 Street City State Zip

Telephone _____ Social Security _____

E-mail address _____ Cell Phone _____

Are you authorized to work in the United States? Yes No

Have you ever been convicted of a misdemeanor or felony? Yes No

Referral source (How did you hear about us?) _____

Were you referred by someone in our employ? (Please list only one person) _____

Have you ever been employed by this organization? Yes No If yes, list dates _____

Type of employment desired: Full-time Part-time

Employment History: Starting with your most recent employer, provide the following information:

<u>Employer:</u>	Date employed: From: To:
Street:	Telephone #:
City/State/Zip:	Fax #:
Job Title:	Why did you leave?
Supervisor's Name:	May we contact for reference? Yes <input type="checkbox"/> No <input type="checkbox"/>
<u>Employer:</u>	Date employed: From: To:
Street:	Telephone #:
City/State/Zip:	Fax #:
Job Title:	Why did you leave?
Supervisor's Name:	May we contact for reference? Yes <input type="checkbox"/> No <input type="checkbox"/>
<u>Employer:</u>	Date employed: From: To:
Street:	Telephone #:
City/State/Zip:	Fax #:
Job Title:	Why did you leave?
Supervisor's Name:	May we contact for reference? Yes <input type="checkbox"/> No <input type="checkbox"/>



References: Give the names of three persons **not related** to you that you have known at least one (1) year.

Name:	Telephone #:
Street:	Years Known:
City/State/Zip:	Occupation:
Name:	Telephone #:
Street:	Years Known:
City/State/Zip	Occupation:
Name:	Telephone #:
Street:	Years Known:
City/State/Zip:	Occupation:

Education:

High School _____	Diploma Received	Yes <input type="checkbox"/>	No <input type="checkbox"/>
College _____	Years Attended _____		
Major _____	Degree Received	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Trade, business or Correspondence School _____	Years Attended _____		
Area of Concentration _____	Degree Received	Yes <input type="checkbox"/>	No <input type="checkbox"/>

List any certifications or skills

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by East Coast Construction Inc. that such employment with East Coast Construction Inc. is at will, for no specified duration and may be terminated by either East Coast Construction Inc. or myself at any time, with or without cause or notice.

I understand that none of the documents, policies, procedures, actions, statements of East Coast Construction Inc. or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of East Coast Construction Inc. except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of East Coast Construction Inc.

I understand that if offered a position with East Coast Construction Inc., I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.



I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to East Coast Construction Inc. and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature Date

Printed Name: _____

East Coast CONSTRUCTION, LLC IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.