

CONIE CONSTRUCTION COMPANY EMPLOYMENT APPLICATION

**WE ARE A DRUG FREE WORKPLACE
WE DO RANDOM DRUG TESTING**

1340 Windsor Ave
Columbus, OH 43211
614-291-5931
614-291-9054 Fax

An Equal opportunity Employer

*We consider applicants for all positions without regard to race, color, sex, religion, national origin, age, marital or veteran status, the presence of non-job related medical conditions or disabilities or any other legally protected status.

- 1) Name: _____ Date: _____
- 2) Address: _____ City: _____ State: _____ Zip: _____
- 3) Cell phone: () _____ Email Address: _____ SSN: _____
- 4) Position for which you are applying _____
- 5) Lowest acceptable wage \$ _____ per hour Date you can start: _____
- 6) Are you available to work Full-time? Yes ___ No ___
- 7) Referred by: _____
- 8) Are you legally eligible to hold employment in the United States: ___ Yes ___ No
- 9) Are you at least 18 years old? ___ Yes ___ No If no, birth date: _____
- 10) Are you related to anyone employed by Conie Construction Co. or All American Trucking? ___ Yes ___ No
- 11) Do you have a Valid Driver's License? ___ Yes ___ No
- 12) Have you ever worked for Conie Construction Co.? Yes ___ No ___ If yes what year _____
- 13) Do you have any outside commitments that would interfere with your work hours? ___ Yes ___ No
If yes, please list day/time restrictions: _____

14) EDUCATION			
Type of School	Name and Address of School	Degree	No.Yrs. Completed
High School		Yes No	
College		Yes No	
Technical, trade, grad school or other		Yes No	

- 15) Are you capable of satisfactorily performing the essential job duties required for the position for which you are applying?
___ Yes ___ No.
- 16) Have you ever been terminated or asked to resign from any job? ___ Yes ___ No
If yes, please explain circumstances: _____
- 17) Do you have adequate transportation to and from work? ___ Yes ___ No
- 18) List any additional or special education, training, skills or machines operated: _____
- 19) Have you ever been convicted (found guilty) of attempting or committing any crime other than a minor traffic violation?
___ Yes ___ No If yes, when _____ For what _____
- 20) Have you been arrested for any matters for which you are out on bail or your own recognizance pending trial?
___ Yes ___ No If yes, when _____ For what _____
- 21) Are you currently on probation: ___ Yes ___ No

Note: A conviction record will not necessarily bar individuals from employment. You are not required to reveal records that have been judicially expunged, sealed or eradicated.

Note: Applicant to pay for Mandatory Drug Test (\$45.00) which will be refunded after 90 days Of employment.

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COPY: VALID DRIVER'S LICENSE –SOCIAL SECURITY CARD

List all former and current employers in reverse order. Give present or most recent employer first. Include any periods of unemployment, self-employment, military service, etc. Information provided is subject to verification.

A resume MAY NOT be submitted as a substitute to filling out this section

Company Name: _____ **Position/Title:** _____

Address: _____ **City** _____ **State** _____ **Zip** _____

Dates Employed: From _____ to _____

Supervisor's

Name: _____ **Title:** _____ **Ph.No.** _____

Starting rate of pay:\$ _____ **per** _____ **Last rate of pay:**\$ _____ **per** _____

Responsibilities: _____

Reason for leaving: _____

If time elapsed between positions, please explain: _____

Company Name: _____ **Position/Title** _____

Address: _____ **City** _____ **State** _____ **Zip** _____

Dates Employed: From _____ To _____

Supervisor's

Name: _____ **Title:** _____ **Ph.No.** _____

Starting rate of pay:\$ _____ **per** _____ **Last rate of pay:**\$ _____ **per** _____

Responsibilities: _____

Reason for leaving: _____

If time elapsed between positions, please explain: _____

Company Name: _____ **Position/Title** _____

Address: _____ **City** _____ **State** _____ **Zip** _____

Dates Employed: From _____ To _____

Supervisor's

Name: _____ **Title:** _____ **Ph.No.** _____

Starting rate of pay:\$ _____ **per** _____ **Last rate of pay:**\$ _____ **per** _____

Responsibilities: _____

Reason for leaving: _____

If time elapsed between positions, please explain: _____

Immigration Act

I understand that, if hired, I will be required to offer examination documents proving that I am a United States citizen or an alien currently authorized to Work in the United States, I also understand that my continued employment is contingent upon my proving the necessary documentation within the prescribed time frames.

Acknowledgement: _____ **Date** _____
Applicant's Signature

READ CAREFULLY BEFORE SIGNING

I hereby certify, to the best of my knowledge, that the answers given are true and complete. I also understand that an omission or falsification may disqualify me from consideration for employment or may be grounds for my immediate dismissal. I agree to conform to the rules and regulations of the company and, if employed, I understand and agree that my employment is at-will and that no employment contract rights have been created. I also understand and agree that my employment may be terminated at any time with or without cause and with or without advance notice at the option of either the company or myself. I understand that no supervisor, manager or other representative of the company has any authority to enter into any express or implied contract for employment for any specific period of time. Any agreement contrary to the above must be in writing and expressly state that it is a contract and be signed by the authorized representative of the company. I agree to a physical examination, if requested, and understand that failure to meet any medical and/or health requirements for the position will prevent my employment with the company. I also understand that employment, for certain positions, and is conditional upon successful completion of a substance abuse screening test as part of the company's pre-employment policy.

Acknowledgement: _____ **Date** _____
Applicant's Signature

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