

R.A. Miller Construction Company, Inc.
Application for Employment

We are an Equal Opportunity Employer. All applications are considered for employment based upon their qualifications, without regard to race, color, religion, sex, national origin, age, disability, and handicap, marital or veteran status.

Date of Application _____

INTRODUCTORY INFORMATION

Name: _____
 Last First Middle Initial

Address: _____
 Street Address City State Zip

Telephone: (____) _____

Are you a citizen of the U.S. or an alien authorized to work in the U.S.? YES NO

If you are younger than 18 years, state your age: _____

Are you available to work full time? YES NO

Are you available to work part time? YES NO

Are you available to work any shift? YES NO
If no, what hours are you available?

Are you available to work every day of the week? YES NO
If no, what days are you unavailable for work?

Are you willing to travel? YES NO

Are you willing to relocate? YES NO

Have you ever been employed by this company before? YES NO

Do you know any current employees? YES NO
If yes, whom? _____

Position desired: _____ Date available to start: _____

Salary or wage desired: _____

EDUCATION AND TRAINING

High School Attended: _____

Degree acquired or highest grade completed: _____

Job-related courses taken or skills acquired: _____

College/Graduate School: _____

Area(s) of study: _____

Degree Acquired or number of years completed: _____

Trade or Technical School Training: _____

Degree or Certificates Received: _____

Other: _____

EMPLOYMENT HISTORY

Beginning with your present or most recent employer, describe your employment history.

PRESENT EMPLOYER:

Name: _____

Address: _____

Telephone #: _____ Nature of Business: _____

Date of Hire: _____ Date of Departure: _____

Ending Position: _____ Ending Pay: _____

Name and Title of Immediate Supervisor: _____

Reason for leaving: _____

May we contact this employer? YES NO If no, explain: _____

NEXT PREVIOUS EMPLOYER:

Name: _____

Address: _____

Telephone #: _____ Nature of Business: _____

Date of Hire: _____ Date of Departure: _____

Ending Position: _____ Ending Pay: _____

Name and Title of Immediate Supervisor: _____

Reason for leaving: _____

May we contact this employer? YES NO If no, explain: _____

NEXT PREVIOUS EMPLOYER:

Name: _____

Address: _____

Telephone #: _____ Nature of Business: _____

Date of Hire: _____ Date of Departure: _____

Ending Position: _____ Ending Pay: _____

Name and Title of Immediate Supervisor: _____

Reason for leaving: _____

May we contact this employer? YES NO If no, explain: _____

NEXT PREVIOUS EMPLOYER:

Name: _____

Address: _____

Telephone #: _____ Nature of Business: _____

Date of Hire: _____ Date of Departure: _____

Ending Position: _____ Ending Pay: _____

Name and Title of Immediate Supervisor: _____

Reason for leaving: _____

May we contact this employer? YES NO If no, explain: _____

Please list any other previous employment on a separate sheet if necessary.

Have you ever been employed under a different name? YES NO

If yes, state entire name and previous employer: _____

Are you currently subject to an agreement with any employer under which you have agreed not to work for a competitor of that employer? YES NO

If yes, explain: _____

Have you ever been discharged or asked to resign by an employer? YES NO

If yes, explain: _____

Except for disability, vacations and holidays, how many days were you absent from work in the last 12 months? _____

MILITARY SERVICE

Have you ever served in the United States Armed Forces? YES NO

If yes, please state the branch and list any job-related skills you acquired or duties performed: _____

MISCELLANEOUS INFORMATION

Have you ever been convicted of a crime, other than a minor traffic offense? YES NO

If yes, explain: _____
(A record of criminal conviction does not necessarily serve as a bar to employment.)

Do you have a valid driver's license? YES NO

If yes, please state license number and state from which it was issued: _____

Has your driver's license ever been suspended or revoked? YES NO

If yes, explain: _____

Have you ever been cited for any moving violations in the past five years? YES NO

If yes, explain: _____

Have you had any accidents in the past five years? YES NO

If yes, explain: _____

REFERENCES

Provide the names, addresses, phone #s and titles of at least three professionals or character references not related to you.

<i>Name</i>	<i>Address</i>	<i>Phone #</i>	<i>Title</i>

Please read the following paragraphs carefully!!

I certify that all the information I have supplied on this application is true, accurate and complete to the best of my knowledge, and that I have, not knowingly, withheld any information which, if known by the company, would affect my application unfavorably. I understand that any false, misleading, and/or incomplete statements on this application and/or in any interview, constitutes sufficient cause for the company not to employ me or if I am employed, to terminate my employment.

I authorize an investigation to be conducted concerning all of the information I have supplied on this application, and all other information, which the company deems to be relevant to my qualifications for employment. I further authorize my present employer, any former employer, any educational institution, any law enforcement organization, any consumer-reporting agency, any professional or personal reference, or any other source or individual to provide all information that is requested in connection with such investigation. I understand that if an investigative report is requested from a consumer reporting agency, I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of the nature and scope of the investigation. I release the company and all named and unnamed sources from any liability, which may result from furnishing information concerning me.

This employment application will be considered active for ninety days (90) from the date below. If I want to be reconsidered for the position with the company after this time, I will fill out a new application.

I agree to take any lawful examination or test including any drug and/or alcohol test, required by the company as a condition of employment or if hired as a condition of continued employment. I further agree that my refusal to take any such lawful examination or test will constitute sufficient cause for the company to not employ me or to terminate my employment. I release the company and all other named and unnamed sources from any and all liability, which may result from any lawful examination or test.

If I am employed, I agree that in consideration for my employment, I will conform to the rules and regulations of the company. I understand that those rules and regulations may be altered, amended or repealed by the company at any time, at the company's sole option and without any prior notice to employees.

I acknowledge that if I am employed, my employment and compensation can be terminated at any time, with or without cause or notice, at the option of either the company or myself. I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, to assure any benefits or terms and conditions of employment, or to make any agreement contrary to the foregoing.

Applicant's Signature

Date