

ETHOS WEST CONSTRUCTION, INC.

APPLICATION FOR EMPLOYMENT

Position Applied For: _____ Date of Application: _____

Full Legal Name: _____ Date of Birth: _____

Email Address: _____ SS#: _____

Street Address: _____ City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact & Phone: _____

Are you known to schools/references by another name? Yes No Name: _____

Are you able to work - Full Time? Part Time?

Do you have relatives employed by Ethos West Construction, Inc.? Yes No

If yes, Name of Relative: _____ Relationship: _____

Do you have a valid driver's license? Yes No License No. _____ State _____

Have you ever been convicted of a felony? Yes No

If yes, explain each conviction on an attached sheet and include date, charge, place. (A conviction is not an automatic bar to employment. Each case is considered separately.)

After reviewing the essential functions from the job description, are you able to perform them with or without reasonable accommodation? Yes No

EDUCATION / EXPERIENCE

High School Attended	City/State	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	G.E.D.? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Trade School, Colleges or Universities	Major	Dates Attended	Degree
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List any licenses, vocational or on-the-job training you have completed that would be useful in this position:

Please give name, and telephone number of three personal references not related to you:

EMPLOYMENT HISTORY

Start with your present or last job first and work backward. Include military service and periods of unemployment of 6 months or more. Be as complete as possible in outlining the duties of each position.

Employed by:	Your Duties:
Address:	
City/State:	
Your job title:	
Supervisor's Name/Title:	
Supervisor's Phone: ())	
Employed From: To:	
Hrs/Week:	Reason for Leaving:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employed by:	Your Duties:
Address:	
City/State:	
Your job title:	
Supervisor's Name/Title:	
Supervisor's Phone: ())	
Employed From: To:	
Hrs/Week:	Reason for Leaving:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employed by:	Your Duties:
Address:	
City/State:	
Your job title:	
Supervisor's Name/Title:	
Supervisor's Phone: ())	
Employed From: To:	
Hrs/Week:	Reason for Leaving:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employed by:	Your Duties:
Address:	
City/State:	
Your job title:	
Supervisor's Name/Title:	
Supervisor's Phone: ())	
Employed From: To:	
Hrs/Week:	Reason for Leaving:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Attach supplemental sheets, if needed.

AUTHORIZATION

- I authorize Ethos West Construction, Inc. at the time of my application for employment and during the course of employment to verify information contained in this application as it relates to the position for which I am being considered, or in which I may be employed.
- I certify my statements in this application are true, complete and correct to the best of my knowledge and belief I understand that any falsification or omission of information may remove my name from the eligibility list, or if I have been hired, cause my dismissal from Ethos West Construction, Inc. I understand that all statements made on this application may be investigated.
- Federal Law requires anyone employed by Ethos West Construction, Inc. present proof of identity and proof of authorization to work in the United States. I understand that I must be able to prove this authorization.

Date: _____ Signature: _____