



AN EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR EMPLOYMENT	Referred by
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Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a medical condition or handicap.

PERSONAL INFORMATION		Social Security Number	Application Date
Last Name	First Name	Middle Initial	Phone or Message Number
Current Address	No. and Street	City	State Zip Code
Driver's License Number State Issued I.D. Number	Specify State	Do you have a current CDL? () Yes () No	
Have you ever been convicted of a crime? () Yes () No <i>Please note that "Yes" will not bar you from consideration of employment) If "YES" please explain:</i>			
Do you have the legal right to work in the United States? () YES () NO <i>Proof of citizenship or immigration status will be required upon employment</i>			

Enter the Highest Level of Education Completed in the Box:	Undergraduate	Graduate
1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4	1 2 3 4

EMPLOYMENT DESIRED	Date you can start work	Wage Desired
Position applying for	Are you currently employed? () YES () NO	If so, may we contact your present employer?
Current Employers Name	Current Employers Address	Current Employer Phone Number
Have you ever been employed by Ken Leahy Construction? () YES () NO If yes please list dates:		
Special Skills and Qualifications. Include any specialized training and certificates.		
If applying for Equipment Operator position, please list all types of equipment operated:		
HEALTH		
Have you had a physical examination within the past two years? Reason for the examination:		() YES () NO
Pre-Employment Drug Screening is required on all newly hired and re-hired employees.		Will you abide by the drug screening rules of the company () YES () NO

CONTINUED ON THE REVERSE

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments

Dates of Employment	Employer Name and Address	Position	Wage	Reason for Leaving

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PERSONAL REFERENCES

Please list 3 non-relatives whom you have known for at least one year and are familiar with your job qualifications.

Name & Address	Telephone Number	Relationship and Years Known

I certify that all answers and statements I have made on this application (*including resume or other attached documents*) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in the application to give you complete information and records regarding my employment, education, character and qualifications.

I understand that my employment is subject to the satisfactory results of any pre-employment drug screen. I also understand that the company may require a current DMV report.

I have read, understand and agree with all of the above.

Date

Signature of Applicant