

EMPLOYMENT APPLICATION

MOCERI CONSTRUCTION, INC.

AN EQUAL OPPORTUNITY EMPLOYER

1013 Donovan Ave
Bellingham, WA 98225

Please Print All Information

POSITION(S) APPLIED FOR _____ DATE OF APPLICATION _____

NAME _____

Last

First

Middle

ADDRESS _____

Street

City

State

Zip Code

TELEPHONE () _____ SOCIAL SECURITY NUMBER _____

Are you under 18 years of age? Yes No

Have you ever been employed here before? Yes No

Are you legally eligible for employment in this country? Yes No

(Proof of U.S. citizenship or immigration status will be required upon employment.)

Date available for work. / /

Type of employment desired: Full-Time Part-Time Temporary Seasonal

Are you able to meet the attendance requirements of the position? Yes No

Reliable Transportation? Yes No

Vehicle Type _____

Driver's license number _____ State _____

EMPLOYMENT HISTORY

Most Recent Employment First

From	To	Employer
Job Title		Address
		Telephone ()
Immediate Supervisor	Duties performed	
Reason for leaving		
		Hourly Rate/Salary

From	To	Employer
Job Title		Address
		Telephone ()
Immediate Supervisor	Duties performed	
Reason for leaving		
		Hourly Rate/Salary

From	To	Employer
Job Title		Address
		Telephone ()
Immediate Supervisor	Duties performed	
Reason for leaving		
		Hourly Rate/Salary

EDUCATION

NAME	COMPLETED	DEGREE RECEIVED
High School		
College		
Other		
Graduate School		

SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses, certificates and/or characteristics of yourself that may qualify you as being able to perform job-related functions for the position which you are applying. _____

HEALTH

Summarize any conditions that could affect job performance or would be helpful information to your co-workers if a problem arose. (Medications, diabetes, epilepsy, allergies, back problems, etc.) _____

EMPLOYMENT GOALS

REFERENCES – PROFESSIONAL

NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no questions on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of this person's need for an accommodation that would be required by the ADA.

Signature of Applicant _____ Date _____

RELEASE AND WAIVER OF LIABILITY

PLEASE READ CAREFULLY BEFORE SIGNING

By my signature, I authorize both my present and all former employers to release information contained in my personal files in connection with my application for employment with Mocer Construction, Inc.

I willingly, knowingly, and voluntarily agree to hold harmless and agree to waive any and all legal claims against each employer, its officers, agents, directors, or representatives who provide employment information from their files to Mocer Construction, Inc.

Signature

Date