

## **APPLICATION FOR EMPLOYMENT**

Name:	Date:			
Address:				
Mobile Phone #:	Email:			
Social Security Number:				
Are you under 18?	If so, enter Date of Birth			
If you are applying for a position which requires you to drive an automobile as part of your job, please provide the following information:				
Driver's License Number	State of issue: Expiration Date:			

### **EDUCATION**

	School and Mailing Address	Comp	oleted	Course of Study
High School		□ YES	□ NO	
College or Trade School		□ YES	□ NO	
Professional School		□ YES	□ NO	
Other Training		□ YES	□ NO	

# **SPECIAL SKILLS**

ist any additional experiences,	skills, and qualifications which you believe rela
o the position for which you are	e applying.
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MPLOYMENT HISTORY	
Employer:	
	Start Date
۸ ما ما بره م م .	End Date:
	Start Salary:
lak Tisla.	End Salary:
T - L. NI L	
Reason for Leaving:	
May we contact this employer?	□ Yes □ No
	formed, skills used or learned, advancements, or
promotions while you worked at	
·	. ,

Address: End St. Job Title: End St. End End St. End St	nd Date:
Address: End St. Job Title: End St. End End St. End St	nd Date:
Job Title: E	tart Salary:
Job Title: E	
	nd Salary:
Tel. Number:	
Reason for Leaving:	
May we contact this employer? ☐ Yes ☐ No	
List the jobs you held, duties performed, skills used or le promotions while you worked at this company:	earned, advancements, or

	Start Date
Address:	End Date:
	Start Salary:
Job Title:	F 10.1
Tel. Number:	
Reason for Leaving:	
May we contact this employer? ☐ Yes ☐ No	)
promotions while you worked at this company:	

## READ, UNDERSTAND, SIGN AND DATE IF YOU AGREE

I certify that the facts set forth in this application are true, correct, and complete without misrepresentations or omissions of any kind whatsoever. I authorize investigation of the statements I have made herein.

I hereby release from all liability, all representatives of Embassy Construction, LLC (The Company) for their acts performed in connection with evaluating my application, background, credentials, and qualifications. I hereby further authorize any party (including the companies, schools and organizations listed in this application form) to release any information they may have about me to The Company, including all my personnel records with prior employers. I also release

all persons, companies, schools, and organizations (and all persons connected with them) who provide such information to The Company from any and all liability for any damage for giving this information. I understand that if any information on this application form is discovered to be incorrect, false or misleading or if there are any misrepresentation or omissions of any kind whatsoever, then The Company may deny me employment or terminate my employment, and I agree that The Company shall not be liable in any respect if it does so.

I also understand that my employment at The Company maybe contingent upon the satisfactory completion of a physical examination which may include a drug screen and an investigation of my work record and references. I consent to a preemployment physical examination and such future examinations as may be required by The Company, which may include drug screens as required.

I understand that if I am employed by The Company, any such employment is not binding on either party for any specific period of time. I further understand that no representative of The Company, other than a Partner, has any authority to enter into any agreement for employment for any specific period of time. Any such agreement must be in writing and signed by a Partner. I understand that any other written or oral statement to the contrary, even if made by a supervisor, manager or officer of The Company is invalid and should not be relied on by me. I understand that if employed I will be an employee-at-will and that either The Company or I may terminate that employment relationship at any time, for any reason, with or without notice.



#### AUTHORIZATION FOR REFERENCE CHECK

I am applying for employment with Embassy Construction, LLC (The Company). I hereby authorize any and all persons (including any and all employers with whom I have been employed, schools that I have attended and organizations with which I have been connected) to release any and all information that have about me to The Company. This includes all of my personnel records with prior employers and any information about my performance during my employment with them and also includes all of my transcripts from any schools that I have attended. I hereby release all persons, companies, schools, and organizations (and all persons connected with them) who provide such information to The Company from any and all liability for any damage for giving this information.

This Authorization shall remain in effect for a period of one (1) year from the date on which I sign it. A photocopy of this Authorization may be used by The Company and shall be as effective as the original.

Applicant Name (Please Print)	Applicant Signature	Date	