

21750 Eighth Street East, Sonoma, California 95476 707.996.7809 Fax 996.2028 Information and instructions:
Answer all questions completely and accurately.

Print or type all answers.

A false statement will be an automatic disqualification. Resumes are welcome, but application must be completed. An equal oportunity employer.

DATE		An equal oportunity employer.					
LAST NAME	FIRST			MIDDLE INITIAL			
MAILING ADDRESS	City	State	Zipcode	PHONE NUMBERS Day: ( )			
HOME ADDRESS IF DIFFERENT	City	State	Zipcode	Eve: ( ) Cell: ( )			
Desired Employment:	Salary Desired:		Drivers Lice				
Date you can start: Are	you employed now:	Can we d	contact your pre	esent employer:			
How did you hear about this job opening? Have you applied here b		rfore? If so, when:					
Do you have friends and/or relatives workin	g for the company? ( ) YES ( ) No	0					
If yes, name(s) and relationship(s):							
Do you have any physical limitations that pr Please describe:	eclude you from performing any wo	rk for which you are a	oplying:( ) YES	s ( ) NO			
DO YOU HAVE LEAGAL RIGHT TO WORK IN	THE UNITED STATES ( ) YES ( ) !	NO					
PERSONAL REFERENCES: (List at least three	e. Do not list relatives or former emplo	oyers.)					
Name and Mailing Address:		Phone:		Relationship:			
1							
2							
3							
4							
5							
Please list names of schools attended		Date last attended		Diploma/Degree			
1							
2							
3							
4							

What construction experience have you had?							
List any licenses or special certificates:							
List any special skills, equipment or machines you can operate:							
EMPLOYMENT HISTORY - please list jobs you worked at in the last 5 years.							
Company:	Job title and/or description of job duties:						
Address:							
City: State: Zip:							
Dates of Employment:	Contact person:						
	Golfinder, personni						
From: To:							
Company:	Job title and/or description of job duties:						
Address:							
City: State: Zip:							
Dates of Employment:	Contact person:						
From: To:							
Company:	Job title and/or description of job duties:						
Address:							
City: State: Zip:							
Dates of Employment:	Contact person:						
From: To:							
"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements and references listed herein and give you permission to gather any and all information concerning my previous employment including any pertinent information they may have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing the information to you. I understand and agree that, if hired, my employment is for no definite period and may regardless of the date of payment for my wages and salary, I may be terminated without prior notice."  If I am offered a position at BGE, I understand that I will be required to have a readiness for work physical at BGE's expense.							
	JSE ONLY						
Interview date: Interviewed by:							
Notes:							
References called:							
Hire Date:							
Job Title:							
Wage:							
Benefits:							

## DISCLOSURE OF BACKGROUND CHECK TO BE CONDUCTED ON YOU

In connection with your application and/or employment with Broderick General Engineering (the "Company"), this notice is provided to inform you that the Company, intend to obtain a "consumer report" and/or "investigative consumer report" (as those terms are defined by the Fair Credit Reporting Act) from a consumer reporting agency for employment purposes. These reports may include information as to your character, general reputation, personal characteristics and mode of living, whichever are applicable. The report(s) may also contain information about you relating to your criminal history, driving, and/or motor vehicle records, verification of your education or employment history, and other background checks. They may involve interviews with sources such as your neighbors, friends, or associates. You have the right, upon written request made within a reasonable amount of time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report by contacting:

## ACKNOWLEDGMENT AND AUTHORIZATION OF BACKGROUND CHECK

By signing below, I authorize Broderick General Engineering (the "Company"), to obtain "consumer reports" and/or "investigative consumer reports" about me for the purpose of assisting the Company in making a determination as to my eligibility for employment or for other lawful employment-related purposes. By signing below, I understand that the Company may obtain consumer reports and/or investigative consumer reports after receipt of this authorization and during the course of my employment, to the extent permitted by law. I agree that this authorization in original, faxed, photocopied or electronic (including electronically signed) form will be requested by or on behalf of the Company.

Washington State applicants or employees only: You have the disclosure of the nature and scope of any investigative consumer your rights and remedies under Washington law.	-					
California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check the box below if you would like to receive (whenever you have such right under California law) a copy of any investigative consumer report at no charge if one is obtained by the Company.						
I wish to receive a copy of any consumer report and/or investigative consumer report if one is obtained by the Company. (Check the box)						
Please refer to the Fair Credit Reporting Act (and, for California applicants or employees only, the California Investigative Consumer Reporting Agencies Act, and for Washington applicants or employees only, the Washington Fair Credit Reporting Act) for your specific rights.						
Signature:	Date:					
Typed Name:						

## <u>Personal Information Necessary to Facilitate Background Check</u>

Name:First Name Mic		/liddle Name	Last I	Last Name					
**Previous names used within past 7 years:									
Social Security Number:		Telephone Number:							
Current Home Address:									
Street Address (No P.O. Boxes)		City	State	Zip Code	County				
How long have you lived at cur	rent addr	<b>ess?</b> # Year							
Previous Addresses:									
Street Address (No P.O. Boxes)	City	State	Zip Code	County	# Years				
Street Address (No P.O. Boxes)	City	State	Zip Code	County	# Years				
Street Address (No P.O. Boxes)	City	State	Zip Code	County	# Years				
**Date of Birth:			Gender:	M F					
Driver's License Number:	St	State:							
Email:			<del></del>						
** This information will only b	e used for	background scre	enings purposes a	nd no other purp	ose by:				