

## **EMPLOYMENT APPLICATON**

It is the policy of Snowco General Contractors, Inc. to provide equal employment opportunities to all applicants without regard to any legally-protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

Personal Information:		
Applicant Name:		
Address:		
City:	State:	ZIP:
Number of years at this address	3:	
Daytime Phone:		
Evening Phone:		
Mobile Phone:		
Email:		
Social Security Number:		
Date of Birth:		
	***	
Emergency Contact:		
Contact Name:		
Relationship to you:		
ddress:		
ity:	State:	ZIP:
aytime Phone:		
vening Phone:		
obile Phone:		

Education and Irain	ing:		
High school name:	Location:		
Highest grade completed:	Diploma?		
College name:	Location:		
Degree? If yes, degree	received:		
Other training: (graduate, tec	nnical, or vocational)		
Awards, honors, and special	achievements:		
Skills:			
List any skills that may be useful in indicate your ability for each particular.	the job you are seeking. Enter th	e number of years of experience and r; 5 represents excellent ability.)	
Skill:			
Years of experience:	Ability:		
Skill:			
Years of experience:	Ability:		
Skill:			
Years of experience:	Ability:		
References:			
List any two people who would be v	villing to provide a reference for yo	ou.	
Address:			
City:	State:	ZIP:	
Telephone:	Relationship:		
Name:			
Address:			
City:	State:	ZIP:	
Telephone:	Relationship:		

## Employment History: List your current or most-recent employment first. Employer name: Address: City: ZIP: State: Phone: Job duties: Reason for leaving: Beginning date: Ending date: Employer name: Address: City: State: ZIP: Phone: Job duties: Reason for leaving: Beginning date: Ending date: Employer name: Address: City: State: ZIP: Phone: Job duties: Reason for leaving: Beginning date: Ending date:

Employment In	normation.
Job applied for:	
Salary desired:	
Who referred you to d	our company?
Have you ever applie	d to our company before? If yes, when?
Are you at least 18 ye	ears old?
How will you get to we	ork?
Driver's License numl	oer:
CDL? If yes, CDL cla	SS:
Are you willing to worl	k any shift, including nights and weekends?
lf no, please state any	limitations:
f you are offered emp	loyment, when would you be available to work?
Are you legally eligible	e for employment in the United States?
Able to perform essen	tial job functions with or without reasonable accommodation?
What accommodation,	if any, would you require?
Other Information	on:
Please provide any add	ditional information that may help us in considering your application
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## Certification:

I understand that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Snowco General Contractors, Inc. to contact former employers and education organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, and education.

If an employment relationship is created, I understand that, unless I am offered a specific written contract of employment, signed by a duly-authorized officer of the organization, the employment relationship will be entirely voluntary in nature. In other words, with appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer would have the same right. Moreover, no agent, representative, or employee of Snowco General Contractors, Inc., except in specific written contract of employment signed by a duly authorized officer of the organization, has the power to alter or vary the voluntary nature of the employment relationship.

## Drug Testing Policy:

It is the policy of Snowco General Contractors, Inc. that its employees should be free of substance abuse. Consequently, the use of illegal drugs by employees is prohibited. The overall goal of drug testing is to insure a drug-free working environment and to reduce accidents, injuries, and fatalities.

Pursuant to regulations promulgated by the Department of Transportation (DOT,) the Company has implemented five types of drug testing: (1) pre-employment, (2) random, (3) reasonable cause, (4) post-accident, (5) return-to-duty, and (6) follow-up testing.

Refusal to submit to the types of drug testing employed by the Company will be grounds for refusal to hire an applicant and termination of an existing employee.

Any employee who becomes unqualified on the basis of violation of the terms of this policy may be subject to termination of employment with the Company.

By signing my name below, I acknowledge that I have carefully read the above Certification and Drug Testing Policy, and I understand and agree to their terms.

Signature of Applicant:	
	점점 선생님 아이들의 이 경기를 모르는 것이다.
Date:	