



# EDO Construction Company Employment Application

Programs, services, and employment are equally available to everyone. Please inform EDO Construction if you require reasonable accommodation for the application or interview.

Date of Review (Month/Day/Year)

**APPLICANT DATA:**

Position applying for:

How were you referred to us:

Full Name:

Address:

City:

State:

Zip:

Phone: ( )

Mobile/Pager/Other:

E-mail:

Date Available to Start:

Social Security #:

Salary Requirements:

Are you a citizen of the United States?  Yes  No

If not, are you legally allowed to work in the United States?  Yes  No

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

Have you ever pleaded "guilty," "no contest," or been convicted of a crime?  Yes  No

If yes, give dates and details:

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number if applicable to position:

State:

**SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS:**

**EMPLOYMENT HISTORY (begin with most recent position):**

Dates of Employment: From: / / To: / / Position(s) Held:

Employer: Address:

Phone: ( ) Supervisor: Title:

Responsibilities:

Starting Salary and Title: Ending Salary and Title:

Reason for Leaving:

May we contact this employer for a reference?  Yes  No

Dates of Employment: From: / / To: / / Position(s) Held:

Employer: Address:

Phone: ( ) Supervisor: Title:

Responsibilities:

Starting Salary and Title: Ending Salary and Title:

Reason for Leaving:

May we contact this employer for a reference?  Yes  No

Dates of Employment: From: / / To: / / Position(s) Held:

Employer: Address:

Phone: ( ) Supervisor: Title:

Responsibilities:

Starting Salary and Title: Ending Salary and Title:

Reason for Leaving:

May we contact this employer for a reference?  Yes  No

I certify that all information entered within this application is accurate to the best of my knowledge. I understand that if employed, any information entered above that is found to be untrue may lead to termination of employment. I authorize EDO Construction Company, Inc. to make investigations of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_