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| <div>Application for Employment</div> | <div><div>ed kriskywicz</div><div>odi</div><div>construction design, inc.</div><div>387 river street, manistee mi 49660 231-723-9552</div></div> |
| Pre-Employment Questionnaire | An Equal Opportunity Employer |
| Date: | |
| Name: | S.S. # |
| Present Address: | |
| | |
| Permanent Address: | |
| | |
| Phone Number: | |
| Are you 18 years or older? ____ Yes ____ No | Drivers License Number: |
| EMPLOYMENT DESIRED: | |
| POSITION: | DATE YOU CAN START: |
| SALARY DESIRED: | ARE YOU EMPLOYED NOW? ____ Yes ____ No |
| | If yes, may we inquire of your present employer? ____ Yes ____ No |
| HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? ____Yes ____No | If yes, when: |
| HAVE YOU BEEN CONVICTED OF A FEONY IN THE PAST FIVE YEARS? You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.) | ____ Yes ____ No |
| EDUCATION | |
| ELEMENTARY SCHOOL: | NUMBER OF YEARS: _____ DID YOU GRADUATE? _____ |
| LOCATION: | COURSE OF STUDY: |
| HIGH SCHOOL: | NUMBER OF YEARS: _____ DID YOU GRADUATE? _____ |
| LOCATION: | COURSE OF STUDY: |
| COLLEGE | NUMBER OF YEARS: _____ DID YOU GRADUATE? _____ |
| LOCATION: | COURSE OF STUDY: |
| TRADE OR BUSINESS SCHOOL | NUMBER OF YEARS: _____ DID YOU GRADUATE? _____ |
| LOCATION: | COURSE OF STUDY/CERTIFICATION: |
| EMPLOYMENT HISTORY: List last 4 employers name, address & phone. | Include Salary - Position - Reason for leaving |
| Name: | Position Held: |
| Address: | Salary & Wages: |
| Phone Number: | Reason for Leaving: |
| Name: | Position Held: |
| Address: | Salary & Wages: |
| Phone Number: | Reason for Leaving: |
| Name: | Position Held: |
| Address: | Salary & Wages: |
| Phone Number: | Reason for Leaving: |
| Name: | Position Held: |
| Address: | Salary & Wages: |
| Phone Number: | Reason for Leaving: |

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| REFERENCES: List 3 persons not related to you, whom you've known at least one year. | |
| Name: | Business or Profession: |
| Address: | Relationship: |
| Phone Number: | How many years acquainted? |
| Name: | Business or Profession: |
| Address: | Relationship: |
| Phone Number: | How many years acquainted? |
| Name: | Business or Profession: |
| Address: | Relationship: |
| Phone Number: | How many years acquainted? |
| PHYSICAL RECORD: | |
| Do you have any physical limitations that preclude you from performing any work for which you are being considered? ____ Yes ____ No | |
| If yes, what can be done to accommodate your limitation? | |
| | |
| | |
| In Case of Emergency Notify: | Phone Number: |

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 CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE.

DATE: _____ SIGNATURE: _____

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|-------------------------|-------------------------|
| INTERVIEWED BY: | DATE: |
| NOTES: | HIRED: ____ YES ____ NO |
| | |
| POSITION: | SALARY/WAGE: |
| DATE REPORTING TO WORK: | EMPLOYMENT MANAGER: |