

**Print Name** 

## **Employment Application**

Thank you for your interest in working for McAbee. We seek qualified personnel who possess strong work ethic, and display integrity, and professionalism at the workplace. If youbelieve you would be an asset to our team, we invite you to complete the application below.

As part of McAbee's hiring process, I, \_\_\_\_\_\_\_\_, agree to a full background check, which includes previous employers, the DMV, credit reporting agencies and criminal record searches before employment is offered.

Applicant Signature Date



		Appli	cant Inform	ation		
Full Name:	Last Fin	rst		Middle Initial	_ Date:	
Address:	Street Address				Apartment/	Unit #
	City		State		ZIP Code	
Phone:		Email:				
Date Availa	ble:	Socia	l Security No.	.:		
Desired Pos	sition:	Yes No		Desired Salary/	Wage: \$	Yes No
Are you a ci	tizen of the United States?	700 710	If no, are yo	u authorized to v	work in the U.S.	
Have you ever worked for this company?			If yes, what position and when?			
Have you e	ver been convicted of a felony?		If yes, expla	.in:		
			Education			
High Schoo	l:		_ Address:			
Start Date:	End Date:		_ Did you g	Yes No raduate?	Diploma?	
College:			_ Address:	Yes No		
Start Date:	End Date:		_ Did you g			
Other:			_ Address:	Yes No		
Start Date:	End Date:		_ Did you g			

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References	
Please provide three professional references.	
Full Name:	Relationship:
Company:	. Phone:
Address:	Job Title:
Full Name:	Relationship:
Company:	. Phone:
Address:	Job Title:
Full Name:	Relationship:
Company:	Phone:
Address:	Job Title:
Previous Employn	nent
Company:	. Phone:
Address:	Supervisor:
Job Title: Starting Salary/Wage: \$	Ending Salary/Wage: \$
Responsibilities:	
Start Date: End Date: Reason for	Leaving:
Yes No May we contact your previous supervisor for a reference?	
Company:	Phone:
Address:	Supervisor:
Job Title: Starting Salary/Wage: \$	Ending Salary/Wage: \$
Responsibilities:	
Start Date: End Date: Reason for	•
Yes No May we contact your previous supervisor for a reference?	

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		Previous Employment								
Company:		Phor	ne:							
Address:		Supe	ervisor:							
Job Title:	Startin	g Salary/Wage: \$	Ending Sa	lary/Wage: \$						
Responsibilities:										
Start Date:	End Date:	Reason for Leavi	ing:							
May we contact your p	previous supervisor for a									
In case of emergency,	notify:	Phone		Relationship						
	Military Service									
Branch:		Start Dat	te:	. End Date:						
Rank at Discharge:		Type of D	Discharge:							
If other than honorable	e, explain:									
Notice-To-Applicant										

McAbee Construction, Inc. (McAbee) is committed to equal employment opportunities for all persons regardless of race, color, religion, sex (including transgender status, sexual orientation, and pregnancy), national origin, age (40 or older), disability or genetic information, or other characteristic protected by federal, state or local law. All applicants are considered on this basis.

other characteristic protected by applicable federal, state or local law.

#### Pre-Employment Release:

I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall, be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in this application to verify my statements and I authorize the past employers, all references, and any other person to answer all questions asked concerning any ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information.

I understand that McAbee Construction, Inc. or its agents may conduct background investigations on me. I further understand these background investigations may include, but not limited to, criminal histories, driving records, consumer credit reports, job and personal reference reports and education reports. I also CONTINUED ON NEXT PAGE



#### **Notice-To-Applicant continued**

understand this information will be requested from various public and private agencies, former employers, individuals, and other entities which may have knowledge of my background.

I authorize, without reservation, any party or agency contacted by McAbee Construction, Inc., or its agents, to furnish any of the above mentioned or related information to them. I agree to hold harmless McAbee Construction, Inc., its agents, or individuals or agencies furnishing information for the pre-employment use of such information.

I understand that nothing contained in the employment application or in the granting of an interview is intended to create an employment contract between McAbee Construction, Inc. and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon McAbee Construction, Inc. unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that McAbee Construction, Inc. retains that same right.

I understand that prior to being offered employment with McAbee Construction, Inc., I may be requested to take an employment examination. In the event I have a disability which will not affect my ability to take the test, I will so inform McAbee Construction, Inc. prior to the administration of the test so that a reasonable accommodation can be made. Requested accommodations may include accessible testing sites, modified testing conditions, and accessible testing formats. McAbee Construction, Inc. reserves the right to require medical documentation concerning the need for the accommodations.

I understand that McAbee Construction, Inc. has a policy of a drug and alcohol-free workplace and that I may be required to submit to a drug/alcohol screening prior to employment, reasonable suspicion, random, and post accident that I am not using or in the possession of drugs or alcohol while on company property or in company vehicles. I further understand that failure to comply with this policy, or submit to required drug/alcohol screening, either prior to employment, reasonable suspicion, random or post accident exists that I may be in possession of, or under the influence of, drugs or alcohol, is grounds for termination.

I understand that if employed, policies and rules which are issued are not conditions of employment and that the employer may revise policies or procedures, in whole or in part, at any time.

• •	be kept on active file for 30 days from date completed, aften nce with established company procedures.	er which
Signature:	Date:	