

KIMMINS CONTRACTING CORP.

Application for Employment

(Pre-employment Questionnaire)

(An Equal Opportunity Employer)

Personal Information

Name _____ Date _____
Social Security
Number _____
Last First Middle

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Phone No. _____ Are you 18 Years or Older? Yes No

Are you legally authorized to work in the U.S.? Yes No

What Foreign Languages Do You Speak Fluently? _____

Have you been convicted of a felony or misdemeanor? ** Yes No Describe:

**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.

EMPLOYMENT DESIRED

Position _____ Date You Can Start _____ Salary Desired _____

Are you Employed Now? _____ If So, May We Inquire of Your Present Employer? _____

Ever Applied to this Company Before? _____

Education	Name and Location of School	No of Years Attended	Did You Graduate	Subjects Studied
Grammar School				
High School				
College				
Trade, Business or Correspondence School				

GENERAL

Subjects of Special Study or Research Work _____

U.S. Military or Naval Service _____ Rank _____ Present Membership in National Guard or Reserves _____

FORMER EMPLOYERS (List below last three Employers, starting with last one first)

Date, Month And Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				

REFERENCES (Give the names of three persons not related to you, whom you have known for at least one year)

	Name	Address	Business	Years Acquainted
1				
2				
3				

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 date of payment of my wages and salary be terminated at any time without prior notice.

Date _____ Signature _____

Do Not Write Below this Line

Interviewed by _____ Date _____

Hired: Yes _____ No _____ Position _____ Dept. _____

Salary/Wage _____ Date Reporting to Work _____

Approved 1 _____ 2 _____ 3 _____
Dept. Head General Manager Other

This form has been designed to strictly comply with State and Federal Equal Employment Practice Laws prohibiting employment discrimination.

APPLICANT DATA RECORD

Applicants are considered for all positions, and employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital status or veteran status, medical condition or handicap.

As employers/government contractors, we comply with government regulations and affirmative action responsibilities.

Solely to help us comply with government record keeping, reporting and other legal requirements, please fill out the Applicant Data Record. We appreciate your cooperation.

This data is for periodic government reporting and will be kept in a Confidential File separate from the Application for Employment.

PLEASE PRINT:

Name _____ Date _____

Address _____

Position Applied For _____

Referral Source: _____Advertisement _____Friend _____Relative
 _____Employment Agency _____Walk In _____Other_____

AFFIRMATIVE ACTION SURVEY

Government agencies require periodic reports on the sex, ethnicity, handicapped and veteran status of applicants. This data is for analysis and affirmative action only. Submission of information about a handicap is voluntary.

Check one: _____ Male _____Female

Check one of the following: Race/Ethnic Group

 _____White _____Black _____Hispanic
 _____American Indian/Alaskan Native _____Asian/Pacific Islander

PLEASE READ CAREFULLY

Date: _____

Applicant Authorization and Consent for Release of Information

We truly welcome your application with Kimmins Contracting Corp. and we are proud that our success is the result of the quality and caliber of our employees. In pursuit of that excellence, we require as a condition of employment and/or continued employment. That all applicants consent to and authorize a Pre-Employment Verification of the background information submitted on the application or resume.

I, the undersigned applicant, do hereby certify that the information provided by me for the purpose of the attached employment application is true and complete to the best of my knowledge. I understand that any false statement provided by me will be considered as cause for possible dismissal. All results of the research into my background will be proprietary and kept confidential. The information obtained will not be provided to any parties that are not part of the hiring decision.

This Authorization and Consent for Release acknowledges that Kimmins Contracting Corp. may now conduct a verification and/or screening of my Previous Employment, Education, Driving Record, References, Tenancy, and any Criminal History Record information pertaining to me that may be in the files of any Federal, State or Local Criminal Justice Agency in any state, territory, possession, or jurisdictional area of the United States of America, or other nations or countries. I acknowledge by my signature below that employment with Kimmins Contracting Corp. is contingent upon satisfactory background verification.

I have read and understand this release and consent, and I authorize the background search. I authorize persons, current and former employers, and other organizations and agencies to provide all information that may be requested. I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is valid as the original.

I do hereby agree to forever release and discharge Kimmins Contracting Corp., their agents and their associates, to the full extent permitted by law from any claims, damages, losses, liabilities, costs, and expenses, or any charge or complaint filed with any agency arising from the retrieving and reporting of this information. According to the Federal Fair Credit Reporting Act, I am entitled to know if my employment application was denied based on information obtained by prospective employer, and to receive, upon written request, a disclosure of the public record information and of the nature and scope of background screen report.

Applicant's Name: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number and State: _____

Phone Number with area Code _____ () _____

Signature (must be signed by applicant)

Date

Forma de autorización y verificación

Autorización y Consentimiento para obtener información del solicitante

Yo, el solicitante y el firmante de bajo, por la presente certifico que la información proveída por mí con el propósito de la solicitud de empleo adjunta es verídica y absoluta y de mi entero conocimiento. Yo entiendo que cualquier información falsa proveída por mí será considerada como causa de un posible despido. Todos los resultados de la investigación de mis antecedentes serán retenidos y se mantendrán confidenciales. La información obtenida no será proveída a nadie que no sea parte de la contratación.

Yo autorizo y doy consentimiento a Kimmins Contracting Corp. para que verifique toda información de empleo actual y anteriores, educación, record de licencia, referencias y cualquier record criminal que este archivado que sea referente a mi persona en diferentes ciudades, condados, otros estados aquí en los Estados Unidos, en cortes federales, judiciales y también en otros países fuera de los Estados Unidos. Yo certifico con mi firma en la parte de abajo de este documento dependerá de la verificación satisfactoria de mi información.

Yo he leído, entendido y doy el consentimiento y autorización que mi información sea liberada. Yo autorizo a personas de mis empleos actuales y anteriores, organizaciones y agencias que provean toda información que pueda ser requerida. Sirva la presente para deslindar a todas personas y agencias que proporcionen tal información de cualquiera y todo reclamo o demanda y daños en conexión con su liberación de cualquier requerimiento de información. Yo estoy de acuerdo que cualquier copia de este documento es tan válida como si fuera el original.

Por la presente estoy de acuerdo en deslindar y liberar por completo y para siempre a Kimmins Contracting Corp., a sus agentes y sus asociados, por lo permitido bajo la ley de cualquier demanda, daños, pérdidas, responsabilidad, costo, y gastos o cualquier cargo o queja archivada con cualquier agencia que pudiera iniciar una demanda o queja contra la compañía y cualquier agencia que haya expedido mi información personal. Conforme a la Ley Federal e Informes de Justicia, yo tengo derecho a saber, si mi aplicación fue denegada basada en la información obtenida por un posible empleador, y recibir mediante una requisición por escrito la razón por la cual no fui elegido (a) y también la información pública obtenida de mí por la compañía explicando la razón por la que fue denegada mi solicitud.

Nombre Completo (por favor letra de molde): _____

Nombre de soltero (a) (apellido de la madre): _____

Número de Seguro Social: _____ Fecha de Nacimiento: _____

Número de Licencia de Manejo: _____

Dirección: _____

Ciudad: _____

Estado y Código Postal: _____

Firma del Solicitante

Fecha de hoy: _____