



ALTO CONSTRUCTION COMPANY EMPLOYMENT APPLICATION

All applicants are considered for all positions without regard to race, religion, color, sex, sexual orientation, pregnancy, age, national origin, disability, military/veteran status, genetic information, or any other protected classification, in accordance with applicable federal, state, and local laws. Those applicants requiring accommodation to complete the application and/or interview process should contact a Human Resources representative. **Applicants will be subject to testing for illegal drugs.** Please print.

Referred by: _____

Position(s) Applied for		Date of Application		
Print Name (Last, First, & Middle)				
Street Address		City	State	Zip Code
Main Phone Number	Alternate Phone Number	Email		

EMPLOYMENT EXPERIENCE

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time. If self-employed, give firm name and supply business references. [Add additional page if necessary]

Name of Employer		Supervisor		May we contact employer?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Address		Main Phone Number			
Dates Employed (Month/Year)		Pay Rate			
From	To	Starting	Final		
Job Title and Duties		Reason for Leaving			

Name of Employer		Supervisor		May we contact employer?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Address		Main Phone Number			

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Dates Employed (Month/Year)		Pay Rate	
From	To	Starting	Final
Job Title and Duties		Reason for Leaving	

Name of Employer		Supervisor	May we contact employer?
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Street Address		Main Phone Number	
Dates Employed (Month/Year)		Pay Rate	
From	To	Starting	Final
Job Title and Duties		Reason for Leaving	

Have you ever been involuntarily terminated or asked to resign from any job?

Yes No

If yes, please explain

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Please explain any gaps in your employment history:

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Please list any other experience, job related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment.

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EDUCATION

Please describe your educational background in the table provided below.

	School Name	Years Completed	Diploma/ Degree (Yes/No)	Course of Study	Special training/skills
High School					
College or University					

Computer Experience: _____

Equipment Experience: _____

BUSINESS AND PROFESSIONAL REFERENCES

Please list three professional references of individuals who are **not** related to you.

Name and Title	Relationship	Phone Number or Email

GENERAL INFORMATION

1. Have you ever worked for this company before? Yes No
 - a. If yes, please give dates and position: _____
2. Do you have friends and/or relatives working for this company? Yes No
 - a. If yes, name(s) and relationship(s): _____
3. On what date are you available to begin work? _____
4. Days/Hours available to work:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

5. Are you available to work? Full-time Part-time
6. Compensation required:.....Per Hour \$ _____
7. If hired, do you have a reliable means of transportation to and from work? Yes No
8. Can you travel if the position requires it? Yes No
9. Are you at least 18 years old? (verification required) Yes No
10. If hired, can you present evidence of your identity and legal right to work in the U.S.? Yes No
11. Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation? Yes No

12. Do you acknowledge that the company is a drug free workplace, you may be subject to drug testing and refusal to take a drug test (or failing a drug test) is grounds for discharge? Yes No

13. **Applicant Statement and Agreement**

Please read each paragraph below. If there is anything that you do not understand, please ask.

- ❖ I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the Company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
- ❖ In the event of my employment with the Company, I understand that I am required to comply with all rules and regulations of the Company.
- ❖ If hired, I understand and agree that my employment with the Company is at-will, and that neither I, nor the Company is required to continue the employment relationship for any specific term. I further understand that the Company or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.
- ❖ I understand that safety of employees is extremely important to the Company and that the Company is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with all regulations related to on-the-job safety and health.
- ❖ I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
- ❖ I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and I am required to complete an I-9 Form.
- ❖ I also understand that if I am hired, it is contingent upon passing a drug screening test and completing a pre-employment physical examination, with a medical provider selected by the company.

MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO ALL OF THE ABOVE TERMS.

Signature: _____ Name (print): _____ Date: _____