

Record of Employment

(Include Military Service)

May we contact your current employer? Yes No

Current Employer	Address	Telephone
Date Started Starting Salary: \$	Starting Position	
Date Left Salary on Leaving: \$	Ending Position	
Name and Title of Supervisor		
Description of Duties	Reason for Leaving	
Previous Employer	Address	Telephone
Date Started Starting Salary: \$	Starting Position	
Date Left Salary on Leaving: \$	Ending Position	
Name and Title of Supervisor		
Description of Duties	Reason for Leaving	
Previous Employer	Address	Telephone
Date Started Starting Salary: \$	Starting Position	
Date Left Salary on Leaving: \$	Ending Position	
Name and Title of Supervisor		
Description of Duties	Reason for Leaving	
Previous Employer	Address	Telephone
Date Started Starting Salary: \$	Starting Position	
Date Left Salary on Leaving: \$	Ending Position	
Name and Title of Supervisor		
Description of Duties	Reason for Leaving	

Check here if additional work or volunteer experience is attached.
(Omit any volunteer work that reflects your race, color, religion, age, sex, marital status or disabilities)

Please explain gaps in work history: _____

Have you ever been discharged or asked to resign from a job? Yes No

If yes, please explain: _____

Education/Training

High School:

Number of Years Completed (circle one) 1 2 3 4

Diploma: Yes No OR GED: Yes No

School _____ City/State _____

College and/or Vocational Schools:

Number of Years Completed (circle one) 1 2 3 4

School _____ City/State _____

Major _____ Degree Earned _____ Date _____

Number of Years Completed (circle one) 1 2 3 4

School _____ City/State _____

Major _____ Degree Earned _____ Date _____

Other Training or Degrees:

School _____ City/State _____

Course/Major _____ Degree/Certificate Earned _____ Date _____

Additional Skills/Accomplishments

Licenses, Apprenticeships or Certifications _____

Other Skills: Keyboard Calculator Computer Software _____
Equipment _____

Awards _____

Professional Memberships _____

Other skills or qualifications _____

References

Please list the names and information of individuals who could provide information about your suitability for work (For example: teachers, counselors, community or volunteer service leaders, co-workers, etc.)

Name _____ Relationship _____
Telephone () _____ E-mail _____ How long have you known him/her? _____

Name _____ Relationship _____
Telephone () _____ E-mail _____ How long have you known him/her? _____

Name _____ Relationship _____
Telephone () _____ E-mail _____ How long have you known him/her? _____

CERTIFICATION AND AUTHORIZATION

Since employment at this company is based upon mutual agreement, either the employee or Boling Concrete Construction may terminate employment at any time and for any reason. In consideration of my employment, I accept the rules and regulations of Boling Concrete Construction and will obey them. I further acknowledge the right of Boling Concrete Construction to change either my job assignment or my hours of work, or both. I understand that no supervisor, officer, agent, or representative of Boling Concrete Construction, other than its President, has any authority to enter into any agreement for employment for any period of time, or to make any agreement contrary to the foregoing.

In addition, I understand and agree that this application shall be valid for a period of 30 days. If I wish to be considered after 30 days, I recognize that I must complete a new application for employment.

I grant permission to Boling Concrete Construction to investigate my personal, educational, and work histories thoroughly. In addition, I authorize Boling Concrete Construction to confirm all information that I have given in connection with my application for employment. I, furthermore, release Boling Concrete Construction and its agents from liability for any acts or omissions occurring during either such investigation or confirmation, or both. I further release any one or more of individuals, organizations and their agents, educational institutions that I attended and their agents, or my former employers and their agents from any liability for any acts or omissions occurring in its or their responses to Boling Concrete Construction's inquiries about me. This release specifically covers the employers and their agents and the educational institutions and their agents that I have identified in my responses to the inquiries made on this application form. I understand and agree that Boling Concrete Construction may deny my application for employment or if it has already employed me, that Boling Concrete Construction may terminate my employment because of information obtained during its investigation or confirmation, or both, of my responses made on my employment application. Upon the termination of my employment with Boling Concrete Construction, regardless of when, how, or why my employment ends, and regardless of whether Boling Concrete Construction or I terminate my employment, I authorize Boling Concrete Construction to release information about my employment history with Boling Concrete Construction and release Boling Concrete Construction and all of its agents from any liability for the disclosure of information about my employment history to either governmental agencies or employers to whom I have applied for a job, or both.

I certify that I have given true and complete information in response to each category of information requested. I have also read, understood, and accepted the conditions of employment stated in this application. I further authorize the release of information as stated above. I recognize Boling Concrete Construction's right either to revoke any employment offer or to terminate my employment if it ever finds any of my responses written on this application either to falsify or to omit, or both, any information.

Signature _____

Date _____

COMPANY ONLY

Interviewed No Yes / / **By** _____

Assessments completed / / **Background verifications completed** / /

Job Offer Yes No **Position** _____

Decline Accept / / **Drug Screen completed** / / **Start Date** / /

FLSA Classification Exempt Non-Exempt Full-time Part-time

Comments _____
