

EQUAL OPPORTUNITY EMPLOYER. It is our policy to abide by all Federal, State, and/or Local laws prohibiting employment discrimination solely on the basis of a person's race, color, creed, national origin, religion, age, gender, marital status, veteran status, physical or mental disability, or any other characteristic protected by law.

P E R S O N A L	PLEASE TYPE OR PRINT IN INK.		Today's Date _____
	Name _____	Social Security # (Optional) _____	
	Address _____	How Long? _____	
	City _____	State/Zip _____	
	Day Phone _____	Home Phone _____	
	Position for which you are applying _____		
	What is your minimum salary requirement? _____ Date available for work _____		
	Do you have any commitments to another employer that might affect your employment with us? _____		
How did you hear about us? Walk-In <input type="checkbox"/> Newspaper <input type="checkbox"/> Internet <input type="checkbox"/> Referral <input type="checkbox"/> Other <input type="checkbox"/>			

G E N E R A L I N F O R M A T I O N	Can you, after employment, submit verification of your legal right to work permanently in the U.S.? _____ Yes _____ No		
	If under 18, state age _____		
	During the last ten years, have you ever been convicted of, plead guilty to, or received probation, deferred adjudication, or any other type of alternative method of supervision or correction for a felony or a misdemeanor, having a penalty of imprisonment or a fine of over \$500? (Answering yes is not an automatic bar to employment but will be considered in relation to specific job requirements). _____ Yes _____ No		
	If yes, explain _____		
	Can you perform the essential functions of the job? _____ Yes _____ No		
	Do you require any accommodation to perform the essential functions of the job? _____ Yes _____ No		
	If yes, explain _____		
	Computer Skills _____		
	Equipment Education _____		
	List any other education, training, special skills or certificates/licenses that you possess related to the job _____		
	List any languages that you frequently speak _____ Read/write _____		
	Do you have a valid driver's license in this state: _____ YES _____ NO		
Military experience? _____ YES _____ NO If yes, what branch? _____			
Rank at separation _____			

List all work experience beginning with the present or most recent job (use back of application, if necessary.)

Name of Employer	Type of Business		
Address	City	State	Zip
Dates Employed (From - To)	Title		
Name and Title of Supervisor	Telephone Number		
May We Contact _____ Yes _____ No	Was Employment _____ Part time _____ Full time		
Brief Description of Responsibilities			
Reason for Leaving	Last Salary		

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R E F E R E N C E S	List three individuals, in addition to listed employment references, known to you for at least three years.		
	Name	Occupation/Association	Telephone
	1. _____		()
	2. _____		()
	3. _____		()

E D U C A T I O N		School Name	City and State	Degree/ Major Course of Study	Degree Received
	Graduate School (s)				Type:
	College (s)				Type:
	High School				

Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, honors received, etc. (You may omit all information that would indicate age, sex, sexual orientation, race, religion, color, national origin, or disability.)

AGREEMENT (Please read the following statement carefully.)

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to be the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize all persons listed above (and on the accompanying resume, if any) to give Westwind Contracting, Inc. any and all information concerning my previous employment and education and any pertinent information they may have, personal or otherwise, and release all parties, such persons and Westwind Contracting, Inc. from liability for any damage that may result from furnishing same to Westwind Contracting, Inc.

If employed by Westwind Contracting, Inc., I agree to abide by the policies and procedures of Westwind Contracting, Inc., which includes the Anti-Harassment Policy. I further understand that my employment can be terminated, with or without cause or notice, at any time at the discretion of Westwind Contracting, Inc., or myself. I further understand that no manager or representative of Westwind Contracting, Inc. has any authority to enter into any agreement, oral or written, on behalf of Westwind Contracting, Inc. for a term of employment or to make any assurance or promise of continued employment.

Signature _____ Date _____