



TALLAHASSEE OFFICE

WEST FLORIDA OFFICE

Application for Employment

Childers Construction Company is an Equal Opportunity Employer. Applicants for all job openings are welcome and will be considered without regard to race, color, religion, national origin, sex, age, sexual orientation, physical or mental disability, or any other basis protected by state, federal or local law. It is the intent of Childers Construction Company to comply with all applicable federal, state and local legislation concerning equal opportunity employment.

To help us learn about your experience, abilities, and interests, please complete this Application for Employment as thoroughly as possible.

Personal Information

NAME: Please PRINT OR TYPE	Home Telephone No.	Cell Phone No.
CURRENT ADDRESS: Street Number and Name, City, State, Zip Code	Number of Years Present Address	
PREVIOUS ADDRESS: Street Number and Name, City, State, Zip Code	Number of Years Previous Address	
Have you ever plead guilty or "no contest" to a crime, been convicted of a crime, had adjudication withheld, prosecution deferred or do you have any criminal charges pending?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you answered yes to the above question, please give dates and details of each:		
Email Address:		

Employment Desired

Type of POSITION desired:	Date Available	Salary Desired
Are you presently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever worked for this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Dates	Position
Do you have any friends or relatives working here? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Relationship

Employment Data

PLEASE LIST IN ORDER OF MOST RECENT EMPLOYMENT FIRST				
Company Name	Phone No.	Dates of Employment		Reason for Leaving Employment
		To:	From:	
Address (Include Street, City, State, Zip Code)				
Job Title - Start	Job Title - Final	Base Rate of Pay - Start	Base Rate of Pay - Final	
Supervisor (Name & Title)				
Description of Job Duties				

Company Name	Phone No.	Dates of Employment		Reason for Leaving Employment
		To:	From:	
Address (Include Street, City, State, Zip Code)				
Job Title - Start	Job Title - Final	Base Rate of Pay - Start	Base Rate of Pay - Final	
Supervisor (Name & Title)				
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Company Name	Phone No.	Dates of Employment		Reason for Leaving Employment
		To:	From:	
Address (Include Street, City, State, Zip Code)				
Job Title - Start	Job Title - Final	Base Rate of Pay - Start	Base Rate of Pay - Final	
Supervisor (Name & Title)				
Description of Job Duties				

Have you ever been terminated? Yes No If Yes, Please explain circumstances _____

Please explain any gaps in your employment history: _____

Education & Training

SCHOOL NAME & LOCATION	YEARS ATTEND	GRADUATE?	DEGREE	MAJOR /SUBJECT
High School				
Technical /Vocational School				
College/University				
Professional Memberships, certificates or licenses held				

References

Professional / Work References We May Contact			
Name	Address	Phone	Relationship

EQUAL OPPORTUNITY EMPLOYER APPLICANT'S STATEMENT

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at will at any time with or without notice or reason, and the Company has the same right. No one other than the President of the Company has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of their disclosure of information about me to the Company. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I further understand that if employed I will be on a 90-day introductory period, and that termination for unsatisfactory performance during that period will not result in any Company responsibility for unemployment benefits. I further understand that completion of the introductory period does not confer any expectation of continued employment, and that if employed, my employment will be for no definite period and "at-will."

By signing this application, I certify that all of the information that I provide on this application and in any interview will be true, complete and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I will be dismissed.

I certify that I have received a written notification that the Company may obtain a consumer report or reports on me. I authorize this Company to obtain such a report or reports for use in connection with my application for employment and for other employment-related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment-related consumer reports at any time during my employment. I understand that the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, Department of Motor Vehicle reports, and investigative consumer reports. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates, or with others with whom I am acquainted or who may have knowledge concerning any such items of information.

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

I HEREBY CERTIFY that all of the information that I have provided in this application is true and accurate.

Date

Signature of Applicant

FOR EMPLOYMENT DEPARTMENT USE ONLY

Interviewer's Signature

Date