

List your current or most recent employment first. Include work related internships, military and volunteer work.

Current Employer: _____

Address _____

City and State: _____

Telephone Number: _____

Supervisor's Name and Title: _____

Your Position Title: _____

Reason for Leaving: _____

Salary: _____ per Hour Week Month Year (circle one)

Dates of Employment: From: _____ To: _____

May We Contact Your Employer: Yes ____ No ____

Previous Employer: _____

Address _____

City and State: _____

Telephone Number: _____

Supervisor's Name and Title: _____

Your Position Title: _____

Reason for Leaving: _____

Salary: _____ per Hour Week Month Year (circle one)

Dates of Employment: From: _____ To: _____

May We Contact Your Employer: Yes ____ No ____

Previous Employer: _____

Address _____

City and State: _____

Telephone Number: _____

Supervisor's Name and Title: _____

Your Position Title: _____

Reason for Leaving: _____

Salary: _____ per Hour Week Month Year (circle one)

Dates of Employment: From: _____ To: _____

May We Contact Your Employer: Yes _____ No _____

Professional References

Name	Title	Company	Phone	Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Releases and Applicant's Signature

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from LnL Construction.. and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form. All applications will kept on file for ninety (90) days.

Initials

All hiring and employment at LnL Construction is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by LnL Construction has no specific term and may be terminated by the employee or LnL Construction with or without notice. I acknowledge that LnL Construction has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with LnL Construction and that failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to LnL Construction. I agree to release and hold harmless LnL Construction from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with LnL Construction may be terminated.

Applicant's Signature

Date