



9099 Hendricks Road
Mentor, Ohio 44060
Office: (440) 974-1011 Fax: (440) 974-1012
www.veteranconstruction.org

EMPLOYMENT APPLICATION

APPLICANT INFORMATION

(Revised 05/23/15)

Veteran Development and Construction is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration on a basis prohibited by any local, state or federal law.

FULL NAME: _____

CURRENT STREET ADDRESS: _____ Apt./Suite # _____

CITY: _____ STATE: _____ ZIP CODE _____

HOME PHONE: () _____ CELL: () _____ E-MAIL: _____

HOW LONG AT THIS ADDRESS: _____ (Provide Previous Address if Less Than 5 Years)

PREVIOUS ADDRESS: (If Applicable) _____

HOW LONG AT THIS ADDRESS: _____

.....

POSITION FOR WHICH YOU ARE MAKING APPLICATION: _____

LIST ANY OTHER POSITIONS YOU WOULD CONSIDER: _____

HOW DID YOU HEAR ABOUT THIS POSITION: _____

ARE YOU SEEKING FULL TIME EMPLOYMENT? (Circle One) YES NO (If you answered "No", please explain)

DO YOU HAVE A RESUME? _____ (If "Yes" please attach or fax to office (440) 974-1011)

IF HIRED, WHEN WOULD YOU BE AVAILABLE TO START WORK: _____

DO YOU HAVE A VALID DRIVERS LICENSE? (Circle One) YES NO STATE: _____
LICENSE NUMBER: _____ RESTRICTIONS: _____ EXPIRES: _____

HAVE YOU HAD YOUR LICENSE SUSPENDED WITHIN THE PAST FIVE YEARS: (Circle One) YES NO
HAVE YOU BEEN CONVICTED OF OMVI WITHIN THE PAST FIVE YEARS: (Circle One) YES NO

ARE YOU A NATURAL BORN U.S. CITIZEN? (Circle One) YES NO

IF YOU ANSWERED "NO" TO THE ABOVE QUESTION, ARE YOU OTHERWISE LEGALLY AUTHORIZED TO
WORK IN THE UNITED STATES? (Circle One) YES NO

NOTE: (Documentation will be required)

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE AS AN ADULT? (Circle One) YES NO
(If you answered "Yes", explain below)

NOTE: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, including any significant details, surrounding circumstances and relevance of the offense to the position applied for may be considered.

DO YOU GRANT PERMISSION TO VETERAN DEVELOPMENT AND CONSTRUCTION TO OBTAIN A
CRIMINAL RECORD AND DRIVERS RECORD CHECK THROUGH THE APPROPRIATE AUTHORITIES?

(Circle One) YES NO

If you answered "Yes", please print and sign your name and today's date below as well as the attached authorization forms.

PRINTED NAME: _____

SIGNATURE: _____ DATE SIGNED: _____

MILITARY SERVICE

HAVE YOU SERVED IN THE UNITED STATES ARMED FORCES: (Circle One) YES NO

(If Yes, Complete the Following)

BRANCH; _____ FROM: _____ TO: _____

TYPE OF DISCHARGE: _____ RANK AT DISCHARGE: _____

DUTIES / SPECIALTY: _____

ARE YOU CURRENTLY IN ANY RESERVE OR NATIONAL GUARD SERVICE: (Circle One) YES NO

Details: _____



PREVIOUS EMPLOYMENT

(List Most Current Employer First)

FROM: _____ THRU: _____

COMPANY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

POSITION: _____ RESPONSIBILITIES _____

STARTING SALARY/RATE: _____ ENDING SALARY/RATE: _____

IMMEDIATE SUPERVISORS NAME: _____ TITLE: _____

PHONE: _____ E-MAIL: _____

REASON FOR LEAVING; _____

MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE: (Circle One) YES NO



PREVIOUS EMPLOYMENT (Continued)

FROM: _____ THRU: _____

COMPANY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

POSITION: _____ RESPONSIBILITIES _____

STARTING SALARY/RATE: _____ ENDING SALARY/RATE: _____

IMMEDIATE SUPERVISORS NAME: _____ TITLE: _____

PHONE: _____ E-MAIL: _____

REASON FOR LEAVING; _____

MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE: (Circle One) YES NO
.....

FROM: _____ THRU: _____

COMPANY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

POSITION: _____ RESPONSIBILITIES _____

STARTING SALARY/RATE: _____ ENDING SALARY/RATE: _____

IMMEDIATE SUPERVISORS NAME: _____ TITLE: _____

PHONE: _____ E-MAIL: _____

REASON FOR LEAVING; _____

MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE: (Circle One) YES NO
.....

(Please Use Attached Continuation Sheet if Necessary)

EDUCATION

HIGH SCHOOL

NAME OF SCHOOL: _____

ADDRESS: _____

DATES ATTENDED (Month/Year): (From) _____ (To) _____

DID YOU GRADUATE? (Circle One) YES NO DATE GRADUATED: _____

IF YOU DID NOT GRADUATE, DO YOU HAVE A "GED" ? (Circle One) YES NO DATE: _____

REMARKS: _____

COLLEGE / UNIVERSITY

NAME OF SCHOOL: _____

ADDRESS: _____

DATES ATTENDED (Month/Year): (From) _____ (To) _____

DID YOU GRADUATE? (Circle One) YES NO DATE GRADUATED: _____

MAJOR: _____ MINOR: _____

TYPE OF DEGREE: _____

REMARKS: _____

TRADE / VOCATIONAL / SPECIALIZED TRAINING

SCHOOL: _____ LOCATION: _____

COURSE/S OF STUDY: _____

DATES ATTENDED (Month/Year): (From) _____ (To) _____

DID YOU COMPLETE THE REQUIRED COURSEWORK? (Circle One) YES NO

DIPLOMA OR CERTIFICATE OF COMPLETION ISSUED? (Circle One) YES NO

REMARKS: _____

.....

(Please Use Attached Continuation Sheet if Necessary)

EDUCATION (Continued)

LIST ANY "CONTINUING EDUCATION" COURSES OR OTHER SPECIAL TRAINING YOU MAY HAVE

(Examples: OSHA 10 Hour Safety, Heavy Equipment Operation, CDL, etc.)

COMPUTER SKILLS: (List all computer related operating programs and software that you are proficient in. (Examples); Microsoft Word, Project, Excel, Power Point, Timberline, Master Builder, etc..)

PERSONAL REFERENCES: List 3 people that you have known for at least 5 years that can attest to your character and other personal tributes. (Do not list former employers)

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>	<u>E-MAIL ADDRESS</u>
1)			
2)			
3)			

NOTE

Veteran Development and Construction is a "Drug Free" workplace. As a condition of your initial employment you will be required to be tested for use of illegal substances. As a condition of your continued employment you may be required to submit to "random" testing if directed.

Signature of Applicant: _____ Date: _____

