

# Northcentral Construction Corporation

631 S. Hickory Street  
Fond du Lac, WI 54935

## EMPLOYMENT APPLICATION

An equal opportunity employer.

### PERSONAL

Name \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Telephone \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(Area Code)

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Have you ever been convicted of a felony in the last seven years?  Yes  No Explain Felony \_\_\_\_\_

Are you a citizen of the United States?  Yes  No \_\_\_\_\_

### JOB INTERESTS/SKILLS

Position(s) applied for \_\_\_\_\_ Wage Desired \_\_\_\_\_

Have you applied for a position here before?  Yes  No If yes, when? \_\_\_\_\_

Type of employment requested  Full Time  Part Time

Date you could begin working \_\_\_\_\_

Summarize any other special skills or qualifications

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### EDUCATION

TYPE OF SCHOOL	NAME AND LOCATION	COURSE OF STUDY	# OF YEARS	GRADE AVERAGE	MAXIMUM GRADE	DEGREE, DIPLOMA, CERTIFICATE AND HONORS RECEIVED
HIGH SCHOOL						
COLLEGE OR UNIVERSITY						
OTHER EDUCATION						
OTHER EDUCATION						

## EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)

1. Name of Employer \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Supervisor and Title \_\_\_\_\_ Your Title \_\_\_\_\_

Employed From \_\_\_\_\_ To \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Work Performed  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for leaving \_\_\_\_\_

2. Name of Employer \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Supervisor and Title \_\_\_\_\_ Your Title \_\_\_\_\_

Employed From \_\_\_\_\_ To \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Work Performed  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for leaving \_\_\_\_\_

3. Name of Employer \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Supervisor and Title \_\_\_\_\_ Your Title \_\_\_\_\_

Employed From \_\_\_\_\_ To \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Work Performed  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for leaving \_\_\_\_\_

## REFERENCES

Name	Relationship	Home Phone	Daytime Phone

If the job requires the use of a motor vehicle, do you have a valid Wisconsin's drivers license? Yes  No

If the job requires the use of a commercial drivers license, do you have a valid commercial drivers license? Yes  No

If you are applying for a production position, are you willing and able to lift up to 100 pounds with or without reasonable accommodation? Yes  No

## AUTHORIZATION, RELEASE, AND CERTIFICATION

I certify that the answers given by me in this application are correct to the best of my knowledge. I understand that any falsification of this application, whether willingly or accidental, is grounds for disqualification of employment consideration, or dismissal from employment if I am hired. I authorize the company to contact any and all of the references I have listed above to obtain previous employment information or any other pertinent information that they may have. Further, I release the above mentioned references from any and all liability for any damages that may result from information collected by this company. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information.

I understand that employment with this employer is not contractual and is at-will. I understand and agree that, if hired, I may voluntarily leave employment at any time, and may be terminated at any time without prior notice for any reason. I understand that any oral or written statements which I may claim to have made to me now or in the future inconsistent with the provisions of this paragraph, are expressly disavowed and revoked by the company, and should not be relied upon by me as an applicant for employment or as an employee, if hired.

I understand this application will be considered inactive after thirty days.

I certify I have read ( or have had read to me) and understand this authorization, release, and certification.

Verification of eligibility to work in the United States must be satisfied for an offer to be made.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Name (print or type) \_\_\_\_\_

