



**APPLICATION FOR EMPLOYMENT -CONTINUED-**



LIST YOUR WORK HISTORY (*most recent first*):

FROM	TO	COMPANY/ENTITY NAME	ADDRESS
JOB TITLE:			PHONE:
BASIC JOB DUTIES:			
REASON FOR LEAVING:			SUPERVISOR:

FROM	TO	COMPANY/ENTITY NAME	ADDRESS
JOB TITLE:			PHONE:
BASIC JOB DUTIES:			
REASON FOR LEAVING:			SUPERVISOR:

FROM	TO	COMPANY/ENTITY NAME	ADDRESS
JOB TITLE:			PHONE:
BASIC JOB DUTIES:			
REASON FOR LEAVING:			SUPERVISOR:

FROM	TO	COMPANY/ENTITY NAME	ADDRESS
JOB TITLE:			PHONE:
BASIC JOB DUTIES:			
REASON FOR LEAVING:			SUPERVISOR:

<i>PLEASE LIST PERIODS OF UNEMPLOYMENT:</i>			
FROM:	TO:	REASON:	
FROM:	TO:	REASON:	

**PLEASE STAPLE YOUR PROFESSIONAL RESUME TO THIS EMPLOYMENT APPLICATION**

In compliance with the Americans with Disabilities Act (ADA) we will reasonably accommodate all persons with disabilities under the circumstances of applying for a job, performing a job, or enjoying benefits equal to those offered to other employees considering the accommodation would not pose any undue hardship. Additionally, the Company will strive to meet any special needs or assistance of those disabilities not covered under the ADA.

I hereby consent to *Placer Building Contractors, Inc.* contacting my former employers, places of education, and any other required source to assist in verifying or determining employment eligibility. I understand that if hired, regular drug testing and background checks may be required to maintain such employment. I understand that misrepresentation, omission, or falsification of information may be grounds for dismissal, criminal action, and/or civil action. I understand that filling out this application for employment or discussing such related items does not indicate an open job opportunity nor does it ensure the obligation of an interview, hiring, or employment contract in any form whatsoever. Furthermore, I understand that if hired, my employment would be at-will, which is employment for no specific duration that may be terminated without notice or cause by either myself or the potential employer. Additionally, I understand that should I be employed, I will be bound by confidentiality and non-compete agreements and may be required to sign related acknowledgments.

**I certify that, to the best of my knowledge, the information on this non-binding job application is true and correct:**

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_