



### **Applicant Information**

Applicant Name \_\_\_\_\_  
Social Security No. \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email Address \_\_\_\_\_

Current Address: \_\_\_\_\_ Years @ \_\_\_\_\_  
Number and street \_\_\_\_\_  
City, State & Zip \_\_\_\_\_

How were you referred to N.E. Building Services,  
Inc.?: \_\_\_\_\_

### **Employment Positions**

Position(s) applying for: \_\_\_\_\_

### **Are you applying for:**

- Temporary work – such as summer or holiday work? [ ] Y or [ ] N
- Regular part-time work? [ ] Y or [ ] N
- Regular full-time work? [ ] Y or [ ] N

What days and hours are you available for  
work? \_\_\_\_\_

If applying for temporary work, when will you be available?  
\_\_\_\_\_

If hired, on what date can you start working? \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Can you work on the weekends? [ ] Y or [ ] N evenings [ ] Y or [ ] N

Are you available to work overtime? [ ] Y or [ ] N

Salary desired: \$\_\_\_\_\_

**Personal Information:**

Have you ever applied to / worked for N.E. Building Services, Inc. before?  
[ ] Y or [ ] N

If yes, please explain (include date): \_\_\_\_\_

Do you have any friends, relatives, or acquaintances working for N.E.  
Building Services, Inc. ? [ ] Y or [ ] N

If yes, state name & relationship: \_\_\_\_\_

If hired, would you have transportation to/from work? [ ] Y or [ ] N

Are you over the age of 18? (If under 18, hire is subject to verification of  
minimum legal age.) [ ] Y or [ ] N

If hired, would you be able to present evidence of your U.S. citizenship or  
proof of your legal right to work in the United States? [ ] Y or [ ] N

If hired, are you willing to submit to and pass a controlled substance test?  
[ ] Y or [ ] N

Are you able to perform the essential functions of the job for which you are  
applying, either with / without reasonable accommodation? [ ] Y or [ ] N

If no, describe the functions that cannot be performed

\_\_\_\_\_

Do you have any medical condition(s) that would hinder any job functions?

\_\_\_\_\_

Have you ever been convicted of a criminal offense (felony or  
misdemeanor)? [ ] Y or [ ] N

If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the case. \_\_\_\_\_  
\_\_\_\_\_

## **Education, Training and Experience**

### **High School:**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School city, state, zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma earned: \_\_\_\_\_

### **College / University:**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School city, state, zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma earned: \_\_\_\_\_

### **Vocational School:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, state, zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma? : \_\_\_\_\_

### **Military:**

Branch: \_\_\_\_\_

Rank in Military: \_\_\_\_\_

Total Years of Service: \_\_\_\_\_

Skills/duties: \_\_\_\_\_

Related details: \_\_\_\_\_

## **Employment History**

Are you currently employed? [ ] Y or [ ] N

If you are currently employed, may we contact your current employer? [ ] Y or [ ] N

Below, please describe past and present employment positions, dating back five years. Please account for all periods of unemployment. **Even if you have attached a resume, this section must be completed.**

Name of Employer: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Business Type: \_\_\_\_\_

Address: \_\_\_\_\_

City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position &

Duties: \_\_\_\_\_

Reason for Leaving:

\_\_\_\_\_  
May we contact this employer for references? [ ] Y or [ ] N

Name of Employer: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Business Type: \_\_\_\_\_

Address: \_\_\_\_\_

City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_

Position &

Duties: \_\_\_\_\_

Reason for Leaving:

\_\_\_\_\_  
May we contact this employer for references? [ ] Y or [ ] N

Name of Employer: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Business Type: \_\_\_\_\_

Address: \_\_\_\_\_

City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_  
Position &  
Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

May we contact this employer for references? [ ] Y or [ ] N

### References

List below three persons who have knowledge of your work performance within the last four years. Please include professional references only.

Name - First, Last: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted: \_\_\_\_\_

Name - First, Last: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted: \_\_\_\_\_

Name - First, Last: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted: \_\_\_\_\_

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature \_\_\_\_\_ Date \_\_\_\_\_