



3240 OAK GROVE ROAD ♦ EAST STROUDSBURG, PA 18302

PHONE: (570) 420-2831 ♦ FAX: (570) 420-2838

## EMPLOYMENT APPLICATION

**POSITION APPLYING FOR:** \_\_\_\_\_

### GENERAL INFORMATION

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Last First M.I.*

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

*Street Address Apartment/Unit #*

*City State ZIP Code*

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If so, when? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

### EDUCATION

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

### ADDITIONAL SKILLS (Describe skills relevant to position applying for)

SKILL	Type of Experience	Years of Experience
Heavy equipment, mechanical, welding, layout, etc...		
Technical skills, professional licenses		
Office Equipment, computers, software		
Other		

Can you perform the functions of the job without special accommodation? YES  NO

**BACKGROUND INFORMATION (Each case is considered separately based on job duties and performance areas)**

Do you hold a valid Pennsylvania Driver's License? YES  NO  Other State: \_\_\_\_\_

If primary position applied for involves driving, have you been convicted, plead no contention, or paid a fine for any traffic violation in the last 3 years? YES  NO  If yes explain: \_\_\_\_\_

Have you been convicted of a felony or served time in prison/jail within the last 10 years? (Conviction will not necessarily bar you from employment) YES  NO  If yes explain: \_\_\_\_\_

Do you hold a valid Commercial Drivers License? YES  NO  Endorsements: \_\_\_\_\_

**EMPLOYMENT HISTORY**

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Wage: \$ \_\_\_\_\_ Ending Wage: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Wage: \$ \_\_\_\_\_ Ending Wage: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Wage: \$ \_\_\_\_\_ Ending Wage: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**MILITARY SERVICE**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**PROFESSIONAL REFERENCES (3 people who can evaluate your work performance)**

Name	Relationship	Years Known	Phone

It is understood and agreed that the foregoing is true to the best of my knowledge, and that my falsification of this application will be grounds for elimination from further consideration or, if employed by The Hendricks & Winot Group Inc., Dba. Northeast Site Contractors, Dba. Northeast Construction Management, for dismissal. I authorize The Hendricks & Winot Group Inc., Dba. Northeast Site Contractors, Dba. Northeast Construction Management, to solicit information regarding my character, general reputation, credit, previous employment, and similar background information, and to contact any and all references I have given on my application. I release all parties and persons connected with any such request for information from all claims, liabilities, and damages that may arise out of the furnishing of such information. If employed, I release The Hendricks & Winot Group Inc., Dba. Northeast Site Contractors, Dba. Northeast Construction Management, from any liability for future references it may provide regarding my work history at the firm. If the position in which I am applying for today requires the use of any of the company vehicles, and the Department of Motor Vehicles finds any issues on my driving record, and the insurance company refuses to insure me, I understand that this is grounds for immediate termination. I understand that employment with The Hendricks & Winot Group Inc., Dba. Northeast Site Contractors, Dba. Northeast Construction Management, is "at-will", which means that either the Company or I can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. Furthermore, in compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required verification document upon hire.

*Applicant's signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_



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## **EMPLOYEE RELEASE AUTHORIZATION**

1. In connection with my application for employment, I understand that an investigative consumer report may be requested that will include information as to my character, performance, and experience, along with reasons for termination of past employment. I understand that directed by company policy and consistent with the job described, you may be requesting information from public and private sources about my: worker's compensation injuries, driving record, court record, education, credentials, credit, and references.
2. Medical and worker's compensation information will only be requested with the Federal American's with Disabilities Act, (ADA), and/or any other applicable state laws. According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my prospective employer from a consumer reporting agency. If so, I will be notified and given the name and address of the agency or the source, which provided the information.
3. I acknowledge that a telephonic facsimile (fax) or photocopy shall be valid as the original. This release is valid for most Federal, State, County agencies.
4. I hereby authorize, without reservation, any law enforcement agency, institution service bureau, school, employer, reference, or insurance company contacted by The Hendricks & Winot Group, Inc., Dba Northeast Site Contractors, Dba Northeast Construction Management, or its agent, to furnish the information described in section 1.
5. I understand that The Hendricks and Winot Group, inc., Dba Northeast Site Contractors, Dba Northeast Construction Management will use the operator abstract(s) requested pursuant to Section 6114 of the Pennsylvania Vehicle Code, and in accordance with Section 391.23 of the Federal Motor Carrier Safety Regulations for the purpose of employment only. This affidavit is in compliance with Section 604 and 607 of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996, (Title II, Subtitle D, Chapter 1 of the Public Law 104-208).

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes. I hereby release The Hendricks & Winot Group Inc., Dba Northeast Site Contractors, Dba Northeast Construction Management and agents, and all persons, agencies, and entities providing information or reports about me from any and all liability arising out of the request for or release of any of the above mentioned information or reports. I understand that is employment is offered and accepted prior to the return of any or all reports, said employment can be terminated upon review of said reports.

Please Print Clearly

Full Name:

\_\_\_\_\_ *Last* \_\_\_\_\_ *First* \_\_\_\_\_ *M.I.*

Other Names You have used:

Home address, City, State & zip

\_\_\_\_\_

\_\_\_\_\_

Social Security number:

\_\_\_\_\_

Date of birth:

\_\_\_\_\_

Name as it appears on Drivers License:

\_\_\_\_\_

Driver's License number:

\_\_\_\_\_

State issuing license:

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_